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Form

**990****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

**2009****Open to Public Inspection**

Department of the Treasury

Internal Revenue Service

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

<b>A</b> For the 2009 calendar year, or tax year beginning , 2009, and ending , 20	
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>Gary Educational Development Foundation</b>
	Doing Business As
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite
	<b>1401 Virginia Street</b>
	City or town, state or country, and ZIP + 4 <b>Gary, Indiana 46407</b>
<b>D</b> Employer identification number <b>31 0894179</b>	<b>E</b> Telephone number <b>( 219 ) 977-2179</b>
<b>G</b> Gross receipts \$ <b>1,134,719</b>	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions) <b>H(c)</b> Group exemption number ▶ <b>N/A</b>
<b>I</b> Tax-exempt status. <input checked="" type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
<b>J</b> Website: ▶	
<b>K</b> Form of organization. <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <b>1976</b> <b>M</b> State of legal domicile: <b>IN</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>To provide Scholarships for college and technical training for students of the City of Gary, Indiana.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>21</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>0</b>
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	<b>1</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	
<b>Revenue</b>	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	
	<b>8</b> Contributions and grants (Part VIII, line 4)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>70,383</b>	<b>217,524</b>
<b>Expenses</b>	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>129,907</b>	<b>917,915</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>200,290</b>	<b>1,134,719</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<b>95,823</b>	<b>99,482</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)		
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<b>84,965</b>	<b>54,624</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)		
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	<b>427,777</b>	<b>32,028</b>
	<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<b>608,565</b>	<b>186,134</b>
<b>Net Assets or Fund Balances</b>	<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>(408,275)</b>	<b>948,585</b>
	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>3,647,463</b>	<b>4,596,050</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>0</b>	
		<b>3,647,463</b>	<b>4,596,050</b>

**Part II Signature Block**

<b>Sign Here</b>	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.		
	<b>Signature of officer</b> <i>Sandra C. Irons</i>	<b>Date</b> <i>5/15/10</i>	
<b>Paid Preparer's Use Only</b>	<b>Preparer's signature</b> <i>Virgil Savage</i>	<b>Date</b> <i>5/15/10</i>	<b>Check if self-employed</b> <input checked="" type="checkbox"/>
	<b>Firm's name (or individual's name if self-employed), address, and ZIP + 4</b> <b>Virgil Savage</b> <b>5831 Adams Street, Merrillville, IN 46410</b>	<b>Preparer's identifying number</b> <b>314-66-7847</b>	<b>EIN</b> ▶
	<b>Phone no.</b> ▶ <b>( 219 ) 801-5285</b>		
	<b>May the IRS discuss this return with the preparer shown above? (see instructions)</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2009)

SCANNED JUL 14 2010

**Part III Statement of Program Service Accomplishments**

- 1** Briefly describe the organization's mission.  
**To Provide scholarships, grants, and awards for college and technical training for students of the City of Gary, Indiana**
- 
- 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: 501 (c) (3)) (Expenses \$ 186,134 including grants of \$ 99,482 ) (Revenue \$ 1,134,719 )

**The Gary Educational Development Foundation provided scholarships, grants, and awards to schools, & students in the City of Gary, Indiana.**

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services. (Describe in Schedule O.)  
 (Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 186,134

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	✓	
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 similar 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 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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V		✓
11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		✓
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.		
• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		
• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.		
• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.		
12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.		✓
12A Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Yes	No
13 Is the organization a school described in section 170(b)(1)(A)(iii)? If "Yes," complete Schedule E		✓
14a Did the organization maintain an office, employees, or agents outside of the United States?		✓
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? 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 a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		✓
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		✓
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		✓
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H		✓

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.		✓
<b>22</b> Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.		✓
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.		✓
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.		✓
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		✓
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		✓
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		✓
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.		✓
<b>25b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.		✓
<b>26</b> 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.		✓
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.		✓
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>28a</b> a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.		✓
<b>28b</b> b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.		✓
<b>28c</b> c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.		✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.		✓
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.		✓
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.		✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.		✓
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.		✓
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.		✓
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.		✓
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.		✓
<b>37</b> 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.		✓
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		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.		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	
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.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> 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?		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.		✓
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
b	If "Yes," enter the name of the foreign country: _____ See 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?		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		✓
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		✓
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		✓
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year.		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		✓
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		✓
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966?		✓
b	Did the organization make a distribution to a donor, donor advisor, or related person?		✓
10	<b>Section 501(c)(7) organizations. Enter:</b>		
a	Initiation fees and capital contributions included on Part VIII, line 12.		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.		
11	<b>Section 501(c)(12) organizations. Enter:</b>		
a	Gross income from members or shareholders.		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		✓
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.		

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body . . . . .	21	
<b>b</b> Enter the number of voting members that are independent . . . . .	0	
<b>2</b> 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? . . . . .		✓
<b>3</b> 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? . . . . .		✓
<b>4</b> Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		✓
<b>5</b> Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		✓
<b>6</b> Does the organization have members or stockholders? . . . . .		✓
<b>7a</b> Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		✓
<b>b</b> Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		✓
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following . . . . .		
<b>a</b> The governing body? . . . . .	✓	
<b>b</b> Each committee with authority to act on behalf of the governing body? . . . . .	✓	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O . . . . .		✓

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
<b>10a</b> Does the organization have local chapters, branches, or affiliates? . . . . .		✓
<b>b</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? . . . . .		
<b>11</b> Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .	✓	
<b>11A</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990. . . . .		
<b>12a</b> Does the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .	✓	
<b>b</b> Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .	✓	
<b>c</b> Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .		✓
<b>13</b> Does the organization have a written whistleblower policy? . . . . .	✓	
<b>14</b> Does the organization have a written document retention and destruction policy? . . . . .	✓	
<b>15</b> 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? . . . . .		
<b>a</b> The organization's CEO, Executive Director, or top management official . . . . .	✓	
<b>b</b> Other officers or key employees of the organization . . . . .	✓	
If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.) . . . . .		
<b>16a</b> 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>b</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 ► Indiana
- 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.  
☐ Own website    ☐ Another's website    ☒ 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: ► Sandra Irons, 1401 Virginia Street, Gary, IN 46407 (219) 977-2179

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

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

[illegible]



[illegible]

1b Total

2 Total number of individuals (including but not limited to those listed above) 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		✓
4		✓
5		✓

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of services	(C) Compensation
N/A		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶

**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
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions).	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>					
	<b>g</b> Noncash contributions included in lines 1a-1f. \$						
	<b>h</b> Total. Add lines 1a-1f						
<b>Program Service Revenue</b>	<b>2a</b> 217,524	<b>Business Code</b> 611710		217,524	217,524		
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g</b> Total. Add lines 2a-2f			217,524			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			917,915	917,915		
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6a</b> Gross Rents	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses						
	<b>c</b> Rental income or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	<b>b</b> Less cost or other basis and sales expenses						
	<b>c</b> Gain or (loss)						
	<b>d</b> Net gain or (loss)						
	<b>8a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events						
	<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>						
<b>b</b> Less cost of goods sold	<b>b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>	<b>Business Code</b>						
<b>11a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue							
<b>e</b> Total. Add lines 11a-11d							
<b>12</b> Total revenue. See instructions.				1,134,719	1,134,719		

**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				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	99,482	99,482		
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	46,550		46,550	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	8,074		8,074	
11 Fees for services (non-employees).				
a Management				
b Legal				
c Accounting	10,290	10,290		
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	20,593	20,593		
g Other				
12 Advertising and promotion				
13 Office expenses	1,145	1,145		
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
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				
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	186,134	131,510	54,624	
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				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	<b>155,205</b>	<b>1</b>	<b>107,319</b>
	<b>2</b> Savings and temporary cash investments . . . . .	<b>381,318</b>	<b>2</b>	<b>119,983</b>
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .		<b>9</b>	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	<b>10a</b>		
	<b>b</b> Less: accumulated depreciation . . . . .	<b>10b</b>	<b>10c</b>	
	<b>11</b> Investments—publicly traded securities . . . . .	<b>3,110,940</b>	<b>11</b>	<b>4,374,747</b>
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>15</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	<b>3,647,463</b>	<b>16</b>	<b>4,596,050</b>	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .		<b>17</b>	
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D . . . . .		<b>25</b>	
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	<b>0</b>	<b>26</b>	<b>0</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	<b>3,647,463</b>	<b>27</b>	<b>4,596,050</b>
	<b>28</b> Temporarily restricted net assets . . . . .		<b>28</b>	
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b> . . . . .	<b>3,647,463</b>	<b>33</b>	<b>4,596,050</b>	
<b>34</b> <b>Total liabilities and net assets/fund balances</b> . . . . .	<b>3,647,463</b>	<b>34</b>	<b>4,596,050</b>	

**Part XI Financial Statements and Reporting**

- 1** Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_  
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? . . .
- b** Were the organization's financial statements audited by an independent accountant? . . .
- c** If "Yes" to line 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? . . .  
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
<b>2a</b>	✓	
<b>2b</b>		✓
<b>2c</b>		
<b>3a</b>		✓
<b>3b</b>		



**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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4</b> <b>Total.</b> Add lines 1 through 3						
<b>5</b> 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)						
<b>6</b> <b>Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>11</b> <b>Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	
<b>13</b> <b>First five years.</b> 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 <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a</b> <b>33% support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>b</b> <b>33% support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>17a</b> <b>10%-facts-and-circumstances test—2009.</b> 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 <b>stop here.</b> 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>b</b> <b>10%-facts-and-circumstances test—2008.</b> 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 <b>stop here.</b> 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>18</b> <b>Private foundation.</b> 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"/>		

**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) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	80,710	60,257	97,604	70,783	105,296	414,250
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5	80,710	60,257	97,604	70,783	105,296	414,250
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support.</b> (Subtract line 7c from line 6.)						414,250

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6	80,710	60,257	90,604	70,383	105,296	414,250
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	105,521	120,730	255,490	129,907	112,228	732,876
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	105,531	120,730	255,490	129,907	112,228	732,876
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12)	186,231	180,987	353,094	200,290	217,524	1,138,126
<b>14 First five years.</b> 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 <b>stop here</b> ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	36 %
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	16	38 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	64 %
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	18	62 %

- 19a 33⅓% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓%, and line 17 is not more than 33⅓%, check this box and **stop here**. The organization qualifies as a publicly supported organization ▶ ☒
- b 33⅓% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓%, and line 18 is not more than 33⅓%, 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 ▶ ☐



**Part IV** **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

► Attach to Form 990.

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

**Gary Educational Development Foundation**

Employer identification number

**31 0894179**

The Board of Directors determine the compensation of all employees of the organization.

Our financial statements are available to the public for review upon request.

The Treasurer of the Board of Directors shares all financial information with the Board of Directors for approval.

Form 990	FIXED ASSETS	STATEMENT 1
FOOTNOTE RE FIXED ASSETS		
OFFICE EQUIPMENT		1,932
LESS ACCUMULATED DEPRECIATION		<u>1,932</u>
NET VALUE OF FIXED ASSETS		<u>-</u>

Form 990	Statement Of Organization's Primary Exempt Purpose	STATEMENT 2
Explanation		

To Award Scholarships, Grants and Awards to Students and Schools Located in Gary, Indiana

Form 990	Cash Grants and Allocations			STATEMENT 3
<u>Classifications</u>	<u>Donee's Name</u>	<u>Donee's Address</u>	<u>Relationship</u>	<u>Amount</u>
Undergraduate Scholorships			NONE	83,550
AWARD	Dr M L King Jr Grants		NONE	3,030
AWARD	Gary Community School Corporation		NONE	12,902
TOTAL INCLUDED ON FORM 990, PART IX, LINE 2				<u>\$ 99,482</u>

Form 990	OTHER SECURITIES	STATEMENT 4
SECURITY DESCRIPTION	COST/FMV	OTHER SECURITIES
REAL ESTATE FUNDS	FMV	<u>0</u>
		<u>0</u>

Form 990	PART V - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES		STATEMENT 5	
<u>NAME AND ADDRESS</u>	<u>TITLE AND AVRG HRS/WK</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BEN PLAN CONTRIB</u>	<u>EXPENSE ACCOUNT</u>
<b>FREDERICK C. FORD</b> 33 WEST MONROE ST CHICAGO, IL 60603	VICE CHAIRMAN 1	0	0	0
<b>SANDRA IRONS</b> 1401 VIRGINIA STREET GARY, IN 46407	TREASURER 1	0	0	0
<b>Charlus Haney</b> 1401 VIRGINIA ST GARY, IN 46407	EXECUTIVE DIRECTOR 40	46,550	0	0
<b>BARBARA COPE</b> 1401 VIRGINIA ST	BD MEMBER 0	-	0	0

## GARY, IN 46407

<b>NELLIE MOORE</b> 3157 W 19TH AVE GARY, IN 46404	<b>DIRECTOR STUDENT PROJECTS</b> 1	0	0	0
<b>JOHN BETJEMANN</b> 486 WEXFORD ROAD VALPARAISO, IN 46385	<b>BD MEMBER</b> 1	0	0	0
<b>SAM BIANCO</b> 2204 WILLIAM DRIVE VALPARAISO, IN 46385	<b>CHAIRPERSON</b> 1	0	0	0
<b>ATTORNEY CORNELL COLLINS</b> 607 SOUTH LAKE STREET GARY, IN 46403	<b>BD MEMBER</b> 1	0	0	0
<b>HAROLD FOSTER</b> 53 WEST 5TH LANE MERRILLVILLE, IN 46410	<b>BD MEMBER</b> 1	0	0	0
<b>EDMUND GUNN</b> 515 EAST 53RD COURT MERRILLVILLE, IN 46410	<b>BD MEMBER</b> 1	0	0	0
<b>MARLOW HICKS</b> 28446 NORTH SIMINOLE COURT IVANHOE, IL 60060	<b>BD MEMBER</b> 1	0	0	0
<b>ATTORNEY ANGELA JONES</b> 700 JACKSON STREET GARY, IN 46407	<b>BD MEMBER</b> 1	0	0	0
<b>Eva J. Gray</b> P.O. Box M15 GARY, IN 46401	<b>BD MEMBER</b> 1	0	0	0
<b>ATTORNEY NADINE MCDOWELL</b> 418 ARTHUR STREET GARY, IN 46404	<b>BD MEMBER</b> 1	0	0	0
<b>Alesia Pritchett</b> 620 East 10th Place GARY, IN 46402	<b>BD MEMBER</b> 1	0	0	0
<b>MAMON POWERS, JR</b> 2636 WEST 15TH AVENUE GARY, IN 46404	<b>BD MEMBER</b> 1	0	0	0
<b>Foster Stephens</b> 1401 Virginia Street GARY, IN 46407	<b>BD MEMBER</b> 1	0	0	0
<b>DR. HILDA RICHARDS</b> 330 SOUTH MICHIGAN AVE CHICAGO, IL 60604	<b>BD MEMBER</b> 1	0	0	0
<b>EUGENIA SACOPULOS</b> 1440 EAST 35TH AVENUE GARY, IN 46409	<b>BD MEMBER</b> 1	0	0	0
<b>DELPHIA SHELTON</b> 1313 WALLACE STREET GARY, IN 46404	<b>BD MEMBER</b> 1	0	0	0

**Eric Williams** BD MEMBER6400 Garfield  
Merrillville IN 46410

1

0

0

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**MARY STEELE** BD MEMBER620 EAST 10TH PLACE  
GARY, IN 46402

1

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**ATTORNEY J. GUADALUPE VALTIEARRABD MEMBER**1440 EAST 35TH AVENUE  
GARY, IN 46409

1

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**Dr. Marion Williams** BD MEMBER2338 Central Drive  
GARY, IN 46407

1

0

0

0

TOTALS INCLUDED ON FORM 990 PART VI

46,550

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SCHEDULE A EXPLANATION OF QUALIFICATIONS TO RECEIVE PAYMENTS

STATEMENT 6

SUBJECT TO APPLICATIONS BY STUDENTS AND REVIEW AND SELECTIONS BY THE BOARD OF TRUSTEES

~~-----~~ Virgil Savage, BS, MBA, MSA - *Management & Accounting Consultant*

Gary, Indiana 46407

TEL: O (219) 980-5139

Cell (219) 801-5285

May 16, 2010

We have assembled from information provided by management, the accompanying statements of receipts and disbursements, and assets, net equities, and liabilities for The Gary Educational Development Foundation for the period then ending twelve months of operations as of December 31, 2009

An assembly is limited to presenting in the form of financial statements information that is the representation of management. We have not compiled, audited or reviewed the accompanying financial statements and accordingly, do not express an opinion or any other form of assurance on them.

Respectfully,

Virgil Savage

**Virgil Savage, BS, MBA, MSA - Management & Accounting Consultant**

Gary, Indiana 46407

TEL (219) 980-4090 - Cell (219) 801-5285

May 16, 2010

We have assembled from information provided by management, the accompanying statements of receipts and disbursements, and assets, net equities, and liabilities for The Gary Educational Development Foundation for the period then ending twelve months of operations as of December 31, 2009

An assembly is limited to presenting in the form of financial statements information that is the representation of management. We have not compiled, audited or reviewed the accompanying financial statements and accordingly, do not express an opinion or any other form of assurance on them.

If management elects to omit substantially all disclosures from the financial statements, we will include an additional paragraph that will read as follows:

Management has elected to omit substantially all of the disclosures required by generally accepted accounting principles. If the omitted disclosures were included in financial statements, they might influence the user's conclusions about the company's financial position, results of operations, and changes in financial position. Accordingly, these financial statements are not designed for those who are not informed about such matters.

If, for any reason, we are unable to complete the assembly of your financial statements, we will not issue a report on such statements as a result of this engagement.

An assembly is based primarily on the creation of journals, coding the transactions, and categorizing for presentation purposes; because we will not perform a detailed examination of all transactions, there is a risk that material errors, irregularities, or illegal acts, including fraud or defalcations, may exist and not be detected by us. We will advise you, however, of any matters of the nature that come to our attention. In accordance with the terms of our engagement, this report and the accompanying assembly are restricted to internal use and may not be shown to any third party for any purpose.

We understand that you will provide us with the basic information required for our assembly and that you are responsible for the accuracy and completeness of that information. We will advise you about appropriate accounting principles and their application and will assist in the preparation of your financial statement, but the responsibility for the financial statements remains with you. This responsibility includes the maintenance of adequate records and related controls, the selection and application of accounting principles, and the safeguarding of assets.

Our examination is not specifically designed and cannot be relied on to disclose material weaknesses in accounting controls. However, during the assembly, if we become aware of such material weaknesses in internal accounting control or ways that we believe management practices can be improved, we will communicate them to you in a separate letter.

Respectfully,  
Virgil Savage

**Gary Educational Development Foundation**  
**Balance Sheet**  
**12/31/2009**

<b><u>Assets:</u></b>	
Operating Cash Account	\$107,319
Investment Cash Account	113,983
Corporate Bonds	1,765,784
Mortgage Backed Securities	0
Equity Securities	1,803,319
Allowance for Unrealized Gains/Losses on Sec.	805,644
Office Equipment	1,932
Accumulated Depreciation	(1,932)
<b>Total Assets</b>	<b>\$ 4,596,050</b>

<b><u>Net Assets:</u></b>	
Beginning Net Assets	3,647,463
Net Increase/Loss	948,587
<b>Ending Net Assets</b>	<b>\$ 4,596,050</b>

**Assets:**

1. **Operating Cash** - Bank account used for all GEDF operating cash receipts and cash disbursements.

2. **Investment Cash Account** - Bank account held at Northern Trust Bank for investment purposes only.

3. **Corporate Bonds, Mortgage Backed Securities, & Equity Securities** - GEDF security investments held for trading at Northern Trust Bank.

4. **Allowance for Unrealized Gains on Securities** - Account held for the allowance of unrealized gains and losses on unsold investment securities held for trading at Northern Trust Bank.

**Net Assets:**

5. **Net Assets** - Net worth value of GEDF derived from assets minus liabilities for 2009.



**GARY EDUCATIONAL DEVELOPMENT FOUNDATION****Income Statement**

January 1, 2009 - December 31, 2009

<b>Description</b>	<b>Amount</b>
Individual Contributions	\$30,095
Foundations & Corporations	37,137
Major Contributions	38,064
Interest Income	81,545
Dividends	30,683
Realized Losses on Assets	25,207
Unrealized Losses on Assets	891,988
<b>TOTAL REVENUE</b>	<b>\$1,134,719</b>

<b>Description</b>	<b>Amount</b>
Scholarships	83,550
Salaries	46,550
Fica Payments	8,074
Professional Services Fees	10,290
Supplies	347
Postage	534
Printing	264
Investment Fees	20,593
Grants	15,932
<b>TOTAL EXPENSES</b>	<b>\$186,134</b>

<b>Net Income</b>	<b>\$948,585</b>
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## **Notes To Income Statement for Calendar Year Ending 2009**

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Net Gain for calendar year 2009 is \$948,585

### **Income:**

1. **Individual Contributions** - Donations under the amount of \$5,000 from individual contributors.
2. **Foundations & Corporations** - Donations from Organizations in any amount.
3. **Major Contributions** - Donations from individuals that are \$5,000 or more.
4. **Interest Income** - Interest income earned from all cash and investment related accounts.
5. **Dividend Income** - Income earned from investments in securities.
6. **Realized Gains** - Income earned from the sale of securities in excess of the original purchase price.
7. **Unrealized Gains** - Income earned from increase in value of unsold investment securities over the original purchase price.

### **Expenses:**

8. **Scholarships** - Expenditures made to and on the behalf of students for Education
9. **Salaries & Fica** - Payroll related expenditures paid to GEDF employees, IRS, and the State of Indiana.
10. **Professional Services** - Fees paid to organizations and/or individuals for services performed on behalf of GEDF.
11. **Supplies, Special Events, Postage, Printing, Membership Dues, Contributions, Depreciation, and Refunds**- Expenditures made for regular operations of the GEDF.
12. **Investment Fees** - Expenditures to the investment firm, Northern Trust, for investment brokerage services.
13. **Grants** - Expenditures made to organizations on the behalf of students for Education