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SCANNEL AUG 2 3 2013

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

A	or the	2009 cal	endar year, or tax year beginning and ending		
В	Check if	Please	C Name of organization	D Employer identific	ation number
	pplicable	use IRS			
	Addres change	ss label or print or	The Topeka Public Schools Foundation		
	Name change	e type	Doing Business As	48-1	017759
	Initial return	See	Number and street (or P.O. box if mail is not delivered to street address) Room/su	· ·	
	Termin ated		P.O. Box 5883	(785	<u>) 295-3018</u>
	Ameno return	ded tions	City or town, state or country, and ZIP + 4	G Gross receipts \$	<u>293,318.</u>
	Application		Topeka, KS 66605	H(a) Is this a group re	
	pendin	F Nan	ne and address of principal officer Valerie Patterson	for affiliates?	Yes X No
		sam	e as C above	H(b) Are all affiliates inc	luded?Yes No
1	Гах-ехе	empt statu	s: X 501(c) (3) ◀ (insert no.) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
J	Websit	te: ► N /	A	H(c) Group exemption	number -
K	orm of	organizatio	on: X Corporation	ear of formation: 1986 N	State of legal domicile: KS
P	art [Summ			
ø	1	Briefly des	scribe the organization's mission or most significant activities To enhance	ce educationa	1
Activities & Governance	ļ.,	oppro	tunities for all students through a part	nership of o	ur
ř	2	Check thi	s box 🕨 🔲 if the organization discontinued its operations or disposed of m	ore than 25% of its net as	
ŏ	3	Number o	f voting members of the governing body (Part VI, line 1a)	3	14
<u>ග</u> න	4	Number o	f independent voting members of the governing body (Part VI, line 1b)	4	14
es	5	Total num	ber of employees (Part V, line 2a)	5	0
viti	6	Total num	ber of volunteers (estimate if necessary)	6	0
√cti	7a	Total gros	s unrelated business revenue from Part VIII, column (C), line 12	7a	0.
_	b	Net unrela	ated business taxable income from Form 990-T, line 34	7b	0.
			MECENER	Prior Year	Current Year
<u>o</u>	8	Contribut	ions and grants (Part VIII, Ine/1h)	141,909.	196,636.
9 10 11 12 12 12 12 12 12 12 12 12 12 12 12	9	Program s	service revenue (Part VIII) (Re 2006 0		
	10	Investme	nt income (Part VIII, column A), lines 3,4,2no(70)n	31,816.	-563.
		enue (Part VIII, column A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,798.	16,828.	
	12	Total reve	nue - add lines 8 through 11 must ealiat Part VIII, column (A), line 12)	183,523.	212,901.
			d similar amounts paid (Part IX, column (A), lines (1-3)	48,006.	67,169.
			paid to or for members (Part IX, column (A), line 4)		
S	15	Salaries, o	other compensation, employee benefits (Part IX, column (A), lines 5-10)		
Expenses	16a	Professio	nal fundraising fees (Part IX, column (A), line 11e)		
×	ь	Total fund	fraising expenses (Part IX, column (D), line 25)		
Ш	17	Other exp	enses (Part IX, column (A), lines 11a-11d, 11f-24f)	27,271.	26,064.
	18	Total exp	enses Add lines 13-17 (must equal Part IX, column (A), line 25)	75,277.	93,233.
	19	Revenue	less expenses. Subtract line 18 from line 12	108,246.	119,668.
Net Assets or Find Balances				Beginning of Current Year	End of Year
sets	20	Total asse	ets (Part X, line 16)	1,367,793.	1,481,461.
AB	21		lities (Part X, line 26)	6,000.	
컐	22		or fund balances. Subtract line 21 from line 20	1,361,793.	1,481,461.
P	art II	Signa	ure Block		
		Under pent	tes of perjury, I declare that have examined this return, including accompanying schedules and statemen Declaration of preparer (other than officer) is based on all information of which preparer has any knowles	its, and to the best of my knowled; dge	ge and belief, it is true, correct,
			MINORAO CAMBORA	1	
Sig	ın	<u> </u>	Ovarive Clover les	Date	·
He	re	1,	nature of officer	Date	
			derie Patterson, President		
		· · ·	e or print name and title	Check if Prepare	er's identifying number
Pai	d	Preparer's		self- (see in:	structions)
Pre	parer's	Signature Firm's nam			
	Only	yours if	welldiing Noe Nerson & Commson line	EIN ►	
	-	self-employ address, ar	and but	Dhana 7	95932499 <i>E</i>
_		ZIP + 4	Topeka, KS 66603-3491	j Prione no. ► 1	852334226
Ma	y the II	HS discus	s this return with the preparer shown above? (see instructions)	instructions	X Yes No

	1990 (2009) The Topeka Public Schools Foundation 48-101	<u>.7759</u>	Page 2
Pa	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission		
•	To enhance educational opprotunities for all students through	а	
	partnership of our community and its public schools.		
	partnership of our community and its public schools.		
			-
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes	X No
	If "Yes," describe these new services on Schedule O.		
2		□ voc	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	res	ואט
	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		
4-	(Code.) (Expenses \$ 5,543.) (Revenue \$		
4a			,
	Elementary Fine Arts Academy which is offered for four weeks	acn	
	summer to elementary students.		
		-	
		-	
4b	(Code.) (Expenses \$ 11,108. including grants of \$ 11,108.) (Revenue \$)
	Highland Park High School.		
4-	(Code) (Expenses \$ 4,208. including grants of \$ 4,208.) (Revenue \$,
4c		in	h1 4 ~ '
	Math Initiative provides math materials for students enrolled	ın pu	DITC
	schools also provides funding for math teachers in public scho	ols t	<u> </u>
	attend conferences.		
		•	
4d	Other program services (Describe in Schedule O)		
	(Expenses \$ 46,310. including grants of \$ 46,310.) (Revenue \$	4.	
4e	Total program service expenses ▶\$ 67,169.		
		Form 99	(2009)
			,/

			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	_1	<u>X</u>	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	<u> </u>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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	5		
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	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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	9		<u>X</u>
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	_10		<u>X</u>
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	_11		<u> </u>
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.	ŀ		
•	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	1		
•	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	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	_		v
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			77
	located outside the United States? If "Yes," complete Schedule F, Part III	16		X_
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> </u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4-	v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	
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	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

The Topeka Public Schools Foundation 48-1017759 Form 990 (2009) Part IV | Checklist of Required Schedules (continued) No Yes 21 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 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, X column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 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 X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No", go to line 25 24a 24b 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? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Х 25a disqualified person during the year? If "Yes," complete Schedule L, Part I 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 25b X Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified Х person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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 X 27 Schedule L. Part III 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): Х A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a 28b b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 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 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? X 31 If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations X 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X Is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 \mathbf{x}_{-} 35 If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? 36 Х If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Form **990** (2009)

37

X

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

				. V	T
1.	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1	Γ	Yes	No
ıa	U.S. Information Returns Enter -0- if not applicable	12			
h	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1a 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and r		1		
·	(gambling) winnings to prize winners?	cportable garming	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	· ·	IC		
20	filed for the calendar year ending with or within the year covered by this return	2a 0			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax retu		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covere		За		х
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	•	4a		х
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	action?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarders	arding Prohibited			
	Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	he organization solicit			
	any contributions that were not tax deductible?		6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribute	tions or gifts			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).		İ		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services	_	i	**
	provided to the payor?		7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w to file Form 8282?	as required	7c		х
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d	16		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a property of the property of the pay premium on a property of the pay premium of the pay premium on a property of the pay premium of the pay premium on a property of the pay premium of the pay		1		
·	benefit contract?	50.00ma.	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?	7f		
a	For all contributions of qualified intellectual property, did the organization file Form 8899 as required		7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	ganizations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc				
	at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
þ	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter.	11			
а	Gross income from members or shareholders	11a	}		
þ	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	Form	990 (วกกลา
			1 01111	200	(5002)

932005 02-04-10

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.

Sec	tion A. Governing Body and Management			
			Yes	No_
1a		14		
b	Enter the number of voting members that are independent	14		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3_		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		_ <u>X</u> _
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			**
	governing body?	7a	-	<u> X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:	_		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			7.7
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		<u> </u>
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
		40	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	405		
	and branches to ensure their operations are consistent with those of the organization?	. 10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Δ_	
11A		40-	х	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	х	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	ın Schedule O how this is done	12c	X	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14		<u> </u>
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, 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?	16a		X
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?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed None	 		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available.	able for		
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest polic	y, and fina	incial	
	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 orga	nization		
	Pamela Johnson-Betts - (785) 295-3018			
	624 S.W. 24TH, Topeka, KS 66611		990	0000:
		⊢∩rm	22241.17	7HIU1

932006 02-04-10

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

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

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

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

Name and Title Average hours per week Valerie Patterson President Treasurer Pamela Johnson-Betts Secretary Odarry Cushinberry Director Jim Deines Director Al Gutierez Director Dale Cushinberry Director Do. Al Gutiere Dale Cushinberry Director Do. Do. Dale Cushinberry Director Do. Do. Do. Do. Do. Do. Do. D	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
President 1.00 0. Bill Rogenmoser 1.00 0. Treasurer 1.00 0. Pamela Johnson-Betts 0. 0. Secretary 10.00 0. Garry Cushinberry 0. 0. Jim Deines 0. 0. Director 1.00 0. Al Gutierez 0. 0. Director 1.00 0. Dale Cushinberry 0. 0. Mary Dalton 0. 0.		0
Bill Rogenmoser 1.00 0. Treasurer 1.00 0. Pamela Johnson-Betts 5ecretary 10.00 0. Secretary 1.00 0. Director 1.00 0. Jim Deines 0. 0. Director 1.00 0. Al Gutierez 0. 0. Director 1.00 0. Dale Cushinberry 0. 0. Mary Dalton 0. 0.		[]
Treasurer 1.00 0. Pamela Johnson-Betts Secretary 10.00 0. Garry Cushinberry Director 1.00 0. Jim Deines Director 1.00 0. Al Gutierez Director 1.00 0. Dale Cushinberry Director 1.00 0. Mary Dalton 0. Mary Dalton 0. O. O.	_	
Pamela Johnson-Betts 10.00 0. Secretary 10.00 0. Garry Cushinberry 1.00 0. Director 1.00 0. Director 1.00 0. Director 1.00 0. Dale Cushinberry 0. 0. Mary Dalton 0. 0.	Δ.	_
Secretary 10.00 0. Garry Cushinberry 1.00 0. Director 1.00 0. Al Gutierez 0. 0. Director 1.00 0. Dale Cushinberry 0. 0. Mary Dalton 0. 0.	0.	0.
Garry Cushinberry 0.0 Director 1.00 Jim Deines 0.0 Director 1.00 Al Gutierez 0.0 Director 1.00 Dale Cushinberry 0.0 Director 1.00 Mary Dalton 0.0	0.	0.
Director 1.00 0. Jim Deines 0. 0. Director 1.00 0. Al Gutierez 0. 0. Director 1.00 0. Dale Cushinberry 0. 0. Mary Dalton 0. 0.	0.	<u></u>
Jim Deines Director 1.00 0. Al Gutierez Director 1.00 0. Dale Cushinberry Director 1.00 0. Mary Dalton	0.	0.
Director 1.00 0. Al Gutierez 0. 0. Director 1.00 0. Dale Cushinberry 0. 0. Director 1.00 0. Mary Dalton 0. 0.	<u> </u>	<u> </u>
Al Gutierez Director 1.00 0. Dale Cushinberry Director 1.00 0. Mary Dalton	0.	0.
Director 1.00 0. Dale Cushinberry 1.00 0. Mary Dalton 0.	0.	
Dale Cushinberry Director 1.00 0. Mary Dalton	0.	0.
Director 1.00 0. Mary Dalton		
Mary Dalton	0.	0.
	0.	0.
Larry Bork		
Director 1.00 0.	0.	0.
Jim Edwards		
Director 1.00 0.	0.	0.
Aric Harrington		
Director 1.00 0.	0.	0.
Mike Schmidt	_	_
Director 1.00 0.	0.	0.
Deb Tutuska		
Director 1.00 0.	0.	0.
Sandi Wilber		
<u>Director</u> 1.00 0.	0.	0.

	rt VI		i Public Scn	oors round	ation	40-101/	759 Page 9
rai		II Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
at st	1 a	Federated campaigns	1a				
E S	b	Membership dues	1b				
e Contributions, gifts, grants and other similar amounts	С	Fundraising events	1c				
	d	Related organizations	1d				
	е	Government grants (contributions)	1e				
i s	f	All other contributions, gifts, grants, and					
		similar amounts not included above	196,636.				
벌	g	Noncash contributions included in lines 1a-1f \$					
ပ္ပန	h	Total. Add lines 1a-1f	>	196,636.			
			Business Code				
မွ	2 a						
Program Service Revenue	b						
S 2	С						
e a	d						
<u>8</u> —	е						
۲	f	All other program service revenue					
	g	Total. Add lines 2a-2f	>				
	3	Investment income (including dividends	s, interest, and				
		other similar amounts)	>	26,104.		<u> </u>	26,104.
	4	Income from investment of tax-exempt	bond proceeds	_			1
	5	Royalties .					
1		(i) R	eal (ii) Personal				
	6 a	Gross Rents					
	b	Less: rental expenses					
		Rental income or (loss)					
		Net rental income or (loss)					
		Gross amount from sales of (i) Secu	ırıtıes (ıi) Other				
			107.				
	h	Less: cost or other basis					,
	_		74.				
	_		567.				
	_	Net gain or (loss)		-26.667.	-26,667.		
		Gross income from fundraising events		20,007	20,0070		
Other Revenue	0 4	including \$ of					
ē		contributions reported on line 1c) See					
ا <u>چ</u>		D = 4.07 b= 4.0	a 24,171.				
je		Less direct expenses	ь 7,343.				
ರ		Net income or (loss) from fundraising e		16,828.	16,828.		
				10,020.	10,020.		
	у а	Gross income from gaming activities. S					
		Part IV, line 19	a		1		
		Less: direct expenses Net income or (loss) from gaming activity	b				
			ties				
	10 a	Gross sales of inventory, less returns					
		and allowances	. a				
		Less. cost of goods sold	b				
H	<u> </u>	Net income or (loss) from sales of inver		<u> </u>			
}	4.0	Miscellaneous Revenue	Business Code				
	11 a				 	-	
	b						
j	C		· · · ·		 	 	
	C	• • • •	<u> </u>		 		
-	-	Total. Add lines 11a-11d		010 001	1 2 2 2 2		26 101
- 1	12 9	Total revenue. See instructions.	<u> </u>	212,901.	-9,839.	0.	26,104. Form 990 (2009)

:

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comple		ions must complete al not required to comple		(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U S. See Part IV, line 22	67,169.	67,169.		
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				
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				
11	Fees for services (non-employees).				
а	Management .				
b	Legal _	2 222			
С	Accounting	2,800.		2,800.	
d	Lobbying .				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	010		010	
17	Travel	810.		810.	-
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 311		1 211	
19	Conferences, conventions, and meetings	1,311.	· · · · · · · · · · · · · · · · · · ·	1,311.	
20	Interest		<u> </u>		
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.)				
а	Coordinator benefits	18,304.		18,304.	
b	Insurance	75 <u>0</u> .		750.	
С	Dues and subscriptions	720.		720.	
d	Office expenses	687.		687.	
е	Bank charges	642.		642.	
f	All other expenses	40.		40.	
25	Total functional expenses. Add lines 1 through 24f	93,233.	67,169.	26,064.	
26	Joint costs. Check here ▶ ☐ 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			<u> </u>	
	0.02-04-10				Form 990 (2009)

				(A) Beginning of year		(B) End of year
\top	1	Cash - non-interest-bearing		2,927.	1	49,507
		Savings and temporary cash investments	•	465,806.	2	449,392
		Pledges and grants receivable, net			3	
		Accounts receivable, net		4	<u> </u>	
		Receivables from current and former officers, directors,				
		employees, and highest compensated employees. Com				
		of Schedule L		5		
	6	Receivables from other disqualified persons (as defined				
	•	4958(f)(1)) and persons described in section 4958(c)(3)(E				
		Part II of Schedule L		6		
,	7	Notes and loans receivable, net			7	
2000	8	Inventories for sale or use	•		8	
?		Prepaid expenses and deferred charges			9	
4		Land, buildings, and equipment: cost or other			Ť	
'	.00	basis Complete Part VI of Schedule D 10a				
	b	Less accumulated depreciation 10b			10c	
,	11	Investments - publicly traded securities		899,060.	11	982,562
	12	Investments - other securities. See Part IV, line 11	•	03370001	12	300,000
- 1	13	Investments - program-related. See Part IV, line 11		13	· · · · · · · · · · · · · · · · · · ·	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	•		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34		1,367,793.	16	1,481,461
	17	Accounts payable and accrued expenses	·, -	1,307,7331	17	<u> </u>
	18	Grants payable	•		18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV o	f Schedule D		21	
	22	Payables to current and former officers, directors, truste			21	
		highest compensated employees, and disqualified person				
<u> </u>		of Schedule L	one. Complete rare ii		22	
,	23	Secured mortgages and notes payable to unrelated third	1 narties		23	
	23 24	Unsecured notes and loans payable to unrelated third p			24	
	2 4 25	Other liabilities. Complete Part X of Schedule D	arties	6,000.	25	_0
- 1	25 26	Total liabilities. Add lines 17 through 25	•	6,000.	26	0
+	20	Organizations that follow SFAS 117, check here	and complete	0,000.	20	
		lines 27 through 29, and lines 33 and 34.	and complete			
<u> </u>	07	Unrestricted net assets			27	
	27	Temporarily restricted net assets			28	
3 2	28	Permanently restricted net assets			29	
{ ²	29	Organizations that do not follow SFAS 117, check he	ro 🕨 🗓 and		23	
-		complete lines 30 through 34.	ic P Las dilu			
3 .	20	Capital stock or trust principal, or current funds		0.	30	
3 3	30	Paid-in or capital surplus, or land, building, or equipmen	t fund	0.	31	0
	31					
2	20	Detained comings and sument accuration at a server	r other funde	1 1 1 1 1 1 1 1	1 2.7	1 AXI UNI
3	32 33	Retained earnings, endowment, accumulated income, or Total net assets or fund balances	r other funds	1,361,793. 1,361,793.	32 33	1,481,461 1,481,461

Pa	rt XI ∣ Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990. X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			1
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X_
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			ĺ
	review, or compilation of its financial statements and selection of an independent accountant?	2c		X
	If the organization changed either its oversight process or selection process during the tax year, explain in 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			ĺ
	consolidated basis, separate basis, or both:			ĺ
	X Separate basis Consolidated basis Both consolidated and separate basis			ĺ
За	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?	3a		X
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.	3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

Open to Public Inspection

Name of t	the organizat	ion						E	mployer i	dentification number
		The Top	eka Public S	chool	s Fou	ndati	on		48	<u> </u>
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	st complet	te this par	t.) See inst	ructions.		
The organ	zation is not a	a private foundation	because it is. (For lines	1 through	11, check	only one b	ox)			
1 🔲	A church, co	nvention of churches	s, or association of chur	ches desc	rıbed in se	ction 170	(b)(1)(A)(i)	١.		
2 🗀	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E.)						
з 🗀	A hospital or	a cooperative hospit	tal service organization (described	n section	170(b)(1)	(A)(iii).			
4 🔲	A medical res	search organization o	operated in conjunction	with a hos	pıtal desci	ribed in se	ction 170	(b)(1)(A)(i	iii). Enter th	ne hospital's name,
	city, and stat	:e:								
5 🔲	An organizat	on operated for the	benefit of a college or ur	niversity ov	vned or op	perated by	a governi	nental un	it describe	d in
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)							
6 🔲	A federal, sta	ate, or local governme	ent or governmental uni	t described	d in sectio	n 170(b)(1	I)(A)(v).			
7 X	An organizat	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit o	r from the	e general p	ublic described in
	section 170	(b)(1)(A)(vi). (Comple	te Part II.)							
8 🖳	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)					
9 🔲	An organizat	on that normally rec	eives: (1) more than 33 ¹	1/3% of its	support f	rom contri	butions, m	nembersh	ıp fees, an	d gross receipts from
	activities rela	ited to its exempt fur	nctions - subject to certa	ain excepti	ons, and (2	2) no more	than 33 1	/3% of it	s support f	from gross investment
	income and i	unrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the org	anızatıon a	fter June 30, 1975
	See section	509(a)(2). (Complete	Part III)							
10	-	•	perated exclusively to te	•	-			-		
11	-	-	perated exclusively for the							
		• • • •	itions described in secti		•		2). See se c	ction 509	(a)(3). Che	ck the box that
		· · · · · ·	organization and compl		_				.—	
	а Туре		• •	Тур		-	-			Type III - Other
e 🗀			t the organization is not							
		•	han one or more publicly		_				9(a)(1) or s	ection 509(a)(2).
f	=		ten determination from t	the IRS tha	atitisa ly	pe I, Type	II, or Type	9 111		
		rganization, check th	· ·				- 5 41 5-11			
g	•		rganization accepted ar			-				Yes No
	* *		rectly controls, either al	one or log	etner with	persons c	iescribeu i	in (ii) and	(III) Delow,	
	•	•	upported organization?	1		•				11g(i)
		· ·	n described in (i) above?					•		11g(ii)
	• •	•	person described in (i) o							11g(iii)
h	Provide the t	ollowing information	about the supported or	ganization	(5)					
		···· -···	(iii) Type of	Viv.) Ic the c	raanization	(v) Did you	u notify the	(vi) l	s the	/ !!\ A
	of supported	(ii) EIN	organization	in col. (i) lis				organizat	ion in col. l	(vii) Amount of support
Orga	anization		(described on lines 1-9	governing	document?	(i) of you	support?	U.S	zed in the S.?	Support
			above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No	,
			(000)						+	· · · · · · · · · · · · · · · · · · ·
							<u> </u>			
									1	
				<u> </u>			ļ			
		1								
Total				<u> </u>		<u> </u>	<u> </u>	<u> </u>		
LHA For F	Privacy Act ar	nd Paperwork Redu	ction Act Notice, see t	he Instruc	tions for			Schedu	le A (Form	990 or 990-EZ) 2009

932021 02-08-10

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009 The Topeka Public Schools Foundation 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 (a) 2005 (f) Total Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (e) 2009 1 Gifts, grants, contributions, and membership fees received. (Do not 907,155. 178,620. 136,357. 141,909. 196,636. 253,633. include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 136,357. 141,909. 196,636. 178,620. 253,633. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, 377,528. column (f) 529,627 6 Public support. Subtract line 5 from line 4 Section B. Total Support (f) Total (c) 2007 Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (d) 2008 (e) 2009 253,633. 178,620. 136,357 141,909. 196,636. 907,155. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties 32,768. 31,816. 26,104. 187,551. 39,076. 57,787. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 1,094,706, 99,678. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 48.38 14 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . 51.02 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2009. 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 ightharpoonsb 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

Part III Support Schedule for Or Section A. Public Support						
Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513			_			
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
The value of services or facilities						
furnished by a governmental unit to						
the organization without charge		,				
Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
b Assessment and the death of the contract of		ı	1	I	ı .	

Section B. Total Support (f) Total Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 (e) 2009 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

•	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.)		<u>.</u>						
13	Total support (Add lines 9, 10c, 11, and 12)			l	<u> </u>				
14	First five years. If the Form 990 is for	the organization's	first, second, thir	rd, fourth, or fifth	tax year as a sectio	n 501(d	c)(3) organizatio	on,	_
	check this box and stop here							<u> </u>	
Sec	ction C. Computation of Publi	c Support Per	rcentage						
15	Public support percentage for 2009 (lii	ine 8, column (f) di	vided by line 13,	column (f))		15			%
	Public support percentage from 2008					16			%
	ction D. Computation of Inves								
17	Investment income percentage for 200	09 (line 10c, colum	nn (f) divided by li	ne 13, column (f))		17			_%
	Investment income percentage from 2					18			%
	a 33 1/3% support tests - 2009. If the			on line 14, and lin	ne 15 is more than 3	3 1/3%	6, and line 17 is	s not	
	more than 33 1/3%, check this box an							►□	
b	33 1/3% support tests - 2008. If the	organization did n	ot check a box or	n line 14 or line 19	a, and line 16 is mo	re thar	n <mark>33 1/3%, and</mark>	ı _	
	line 18 is not more than 33 1/3%, chec	ck this box and ste	op here. The orga	nization qualifies	as a publicly suppo	rted o	rganization	▶ L	_]
20	Private foundation. If the organization	n did not check a l	box on line 14, 19	a, or 19b, check	this box and see ins	tructio	ons	▶	᠋.
				•			A /F 000	- 000 EZ\ 0	~~

Schedule A (Form 990 or 990-EZ) 2009

from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b

8 Public support (Subtract line 7c from line 6)

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization

The Topeka Public Schools Foundation

Employer identification number

Des	The Topeka Public		48-1017/59
Pa			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line		(I.) Francisco and all reservoirs
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year	<u></u>	
5	Did the organization inform all donors and donor advisors in	_	
	are the organization's property, subject to the organization's	•	L Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
	impermissible private benefit?		Yes No
Pa		<u> </u>	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p	· —	storically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		. 2b
C	Number of conservation easements on a certified historic str	• •	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year >		
4	Number of states where property subject to conservation ea	· · · · · · · · · · · · · · · · · · ·	
5	Does the organization have a written policy regarding the per	· · · · · · · · · · · · · · · · · · ·	
_	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	-	
7	Amount of expenses incurred in monitoring, inspecting, and	_	
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170	Yes No
_	and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservati	on agamenta in its revenue and expense	• — • • • • • • • • • • • • • • • • • •
9	include, if applicable, the text of the footnote to the organization		
		tion's financial statements that describes	the organization's accounting to
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures. or C	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e	•	
	the footnote to its financial statements that describes these		, ,
b	If the organization elected, as permitted under SFAS 116, to		nce sheet works of art, historical treasures,
-	or other similar assets held for public exhibition, education, of		
	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 tre	asures, or other similar assets for financia	
_	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1	_	. > \$
	Assets included in Form 990, Part X		. > \$
-		•	

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

Sche Par		eka Public collections of A						48-10 ar A sse			ge 2
3	Using the organization's acquisition, accessi										3
	(check all that apply):										
а	Public exhibition	d		Loan or e	xchange pr	ograms					
b	Scholarly research	е									
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how th	ey furthe	r the organi	zation's exe	empt purp	ose in Pai	t XIV.		
5	During the year, did the organization solicit o										
_	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran						rm 990, P	art IV, line	9, or		
	reported an amount on Form 990, Pa	-		•			•				
1a	Is the organization an agent, trustee, custod	ian or other intermed	lary for	contribut	ons or othe	r assets no	t included				
	on Form 990, Part X?		•						Yes		No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowina t	table.			•				
-	Too, explain the arrangement in rail rive	a							Amoun	t	
_	Beginning balance						1c				
	Additions during the year	•			•		1d			-	
	Distributions during the year	•				•	1e				
4	Ending balance	•		•			1f				
0-	Did the organization include an amount on Fe	orm 990 Part V line	212				•	٦	Yes		No
	If "Yes," explain the arrangement in Part XIV.		21.					_		•	, ,,,
Par			swered	"Yes" to	Form 990 F	Part IV line	10				
	Endownione Fands: Complete	(a) Current year		rior year		years back		vears hack	(e) Four	r vears	hack
	De sussing of consultations	(a) Current year	(0) -	TIOI year	(C) TWO	years back	(d) Inico	years back	(6) 1 001	yours	buon
1a	Beginning of year balance				+		 			_	
b	Contributions								 		
C	Net investment earnings, gains, and losses	-				*****	 		 		
d	Grants or scholarships				_						
е	Other expenditures for facilities	i									
	and programs .						 		 		
f	Administrative expenses								 		
g	End of year balance				, .						
2	Provide the estimated percentage of the year	r end balance held a	as								
а	Board designated or quasi-endowment		_%								
b	Permanent endowment >	%									
		%									
За	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are hel	d and admir	nistered for	the organ	izatıon	1		
	by.									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as required o	n Sched	dule R?					3b		
4	Describe in Part XIV the intended uses of the										
Pai	t VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 9	90, Part X,	ine 10.		· · · · · ·			
	Description of investment	(a) Cost or o basis (investi		\ ··· /	ost or other sis (other)	1 , ,	Accumulat epreciatioi		(d) Boo	k valu	∍
1a	Land										
b	Buildings										
	Leasehold improvements		-								
d	Equipment										
	Other .										
	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, colur	nn (B), lin	e 10(c))		•	•			0.

Schedule D (Form 990) 2009 The Topeka Part VII Investments - Other Securities. Se	Public Sch	lools Found	lation	48-1017759 Pag
(a) Description of security or category	(b) Book value		(c) Metho	d of valuation:
. (including name of security)	(b) Book value		Cost or end-of	f-year market value
Financial derivatives				
Closely-held equity interests				
Other		·		
			····	
	·			
				
	_			·
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. S	ee Form 990, Part X	(, line 13		
(a) Description of investment type	(b) Book valu	·		d of valuation:
(a) Description of investment type	(b) Book vaid		Cost or end-of	f-year market value
	-			
			······································	
- · · · · · · · · · · · · · · · · ·		<u> </u>		-
			**	
Fotal. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X, line	15			
	Description			(b) Book value
(4)				(-,
			· · · · · ·	
	· -	 -		
	· -		·	
Total. (Column (b) must equal Form 990, Part X, col (B) lin	e 15.)			>
Part X Other Liabilities. See Form 990, Part X	line 25			
1. (a) Description of liability		(b) Amount		
Federal income taxes				
		 		
		-		
Total. (Column (b) must equal Form 990, Part X, col (B) lin				
Total. (Column (b) must equal Form 990, Part X, col (B) lin 2. FIN 48 Footnote In Part XIV, provide the text of the foo uncertain tax positions under FIN 48			tements that repo	rts the organization's liability fo

	t XI Reconciliation of Change in Net Assets from Form 990 to				117759 Page 4
		Audited Filla	ilciai State		212,901.
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		93,233.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		119,668.
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8		9		110 668
10 Par	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Stateme		10 Prue per F	Return	119,668.
1	Total revenue, gains, and other support per audited financial statements	THE WILLIAM TO A	onde per i	1	220,244.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•	 	220,2441
	Net unrealized gains on investments	2a			
a	Donated services and use of facilities	2b	· -	1	
•	Recoveries of prior year grants	2c	·	1	
C	Other (Describe in Part XIV.)	2d	7,343.	1	
d	Add lines 2a through 2d		7,343.	2e	7,343.
e	Subtract line 2e from line 1			3	212,901.
3	•				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1. Investment expenses not included on Form 990, Part VIII, line 7b	1 4-1			
a	•	4a		1	
b	Other (Describe in Part XIV) Add lines 4a and 4b	40		4c	0.
_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	212,901.
5 Pai	t XIII Reconciliation of Expenses per Audited Financial Statem	ents With Exp	enses per		
1	Total expenses and losses per audited financial statements	· · · · · · · · · · · · · · · · · · ·	• -	1	100,576.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
- a	Donated services and use of facilities	2a			
h	Prior year adjustments	2b		1 1	
	Other losses	2c		1	
d	Other (Describe in Part XIV)	2d	7,343.		
	Add lines 2a through 2d		.,	2e	7,343.
3	Subtract line 2e from line 1		•	3	93,233.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	•	-		
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV.)	4b	•	1 1	
	Add lines 4a and 4b			4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		•	5	93,233.
Par	t XIV Supplemental Information		· · · · · · · · · · · · · · · · · · ·	1	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	II, lines 1a and 4; f	Part IV, lines 1	b and 2b;	Part V, line 4, Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b Also comp				
, ,	, and an analysis of the second secon	• •	•		
Pai	t XII, Line 2d - Other Adjustments:				
				·	
Fur	nd-raising event costs: 7343.				
					_
Par	t XIII, Line 2d - Other Adjustments:				
13	d maiging event goats: 7242				
rui	nd-raising event costs: 7343.			<u>-</u>	
			· · · · · · · ·	Schedul	e D (Form 990) 2009

932054 02-01-10

09450722 748905 07845

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open To Public Inspection

lame of the organization						Employer ide	ntification number
The Top	eka Public Schools	Fo	und	ation		48-1017	759
•	Complete if the organization answer				ine 1	7 Form 990-EZ	filers are not
Indicate whether the organization rais	ed funds through any of the following Solicitating Solicitating Special Special or oral agreement with any individual art VII) or entity in connection with products or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-ge govern using e ding of ional f	overnment grants nment grants events fficers, directors, trus undraising services?	stees	Yes	
(i) Name of individual or entity (fundraiser)	(i) Name of individual (ii) Activity (iii) Did fundraised fundraised (iv) Gross receipts			to (c	Amount paid or retained by) fundraiser ted in col (i)	(vi) Amount paid to (or retained by) organization	
		Yes	No				
							
						. <u>-</u>	
 Total							
3 List all states in which the organization	on is registered or licensed to solicit	funds	or has	been notified it is ex	emp	t from registrati	on or licensing.
				-			

932081 02-03-10

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

Schedule G (Form 990 or 990-EZ) 2009

che Par	dule G (Form 990 or 990-EZ) 2009 The To	peka Public	Schools Foun	dation 48-	-1017759 Page 2
	on Form 990-EZ, line 6a List events with			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		(a) Event #1	(b) Event #2 Golf	(c) Other events None	(d) Total events
		Art for Kids			(add col. (a) through
e		(event type)	(event type)	(total number)	col (c))
Hevenue	1 Gross receipts	14,681	9,490.		24,171
	2 Less Chantable contributions				
\downarrow	3 Gross income (line 1 minus line 2)	14,681	9,490.		24,171
	4 Cash prizes				
8	5 Noncash prizes				
4	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
1	9 Other direct expenses	4,227	. 3,116.		7,343
1	10 Direct expense summary. Add lines 4 through	h 9 ın column (d)		>	(7,343
	11 Net income summary. Combine line 3, colum		000 D 10/1 40	<u> </u>	16,828
aı	rt III Gaming. Complete if the organization	answered "Yes" to Forr	m 990, Paπ IV, line 19, or l	reported more than	
7	\$15,000 on Form 990-EZ, line 6a.	T	(b) Pull tabs/instant		(d) Total gaming (add
		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col (c
1	1 Gross revenue		 		
	2 Cash prizes				
	3 Noncash prizes .		-		
	4 Rent/facility costs				
	5 Other direct expenses .				
		Yes %		Yes %	
	6 Volunteer labor	L_ No	No	No	
	7 Direct expense summary. Add lines 2 through	h 5 ın column (d)		•	(
	8 Net gaming income summary. Combine line	1, column (d), and line 7			Yes No
9	Enter the state(s) in which the organization opera	ites gaming activities:			Tes No
а	Is the organization licensed to operate gaming ad	ctivities in each of these	states?		9a
þ	If "No," explain:				
					
١.	Were any of the organization's gaming licenses r	evoked suspended or t	terminated during the tax	vear?	10a
	If "Yes," explain:	evoked, suspended on	terminated during the tax	your	104
			 		
	Door the organization operate gaming activities	with nonmembers?			11
	Does the organization operate gaming activities to the organization a grantor, beneficiary or trusted		 er of a partnership or othe	er entity formed to	· '' -
	administer charitable gaming?			<u> </u>	. 12

Schedule G (Form 990 or 990-EZ) 2009 The Topeka Public Schools Foundation 48-10.	<u> 1775</u>	<u>9 Ра</u>	age 3
		Yes	No
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility . 13a %	_		
b An outside facility			
14 Enter 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?	15a		
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 of the third party:			
Name			
Address ▶			
16 Gaming manager information:			
Name			
Gaming manager compensation ▶ \$			
Description of services provided			
Director/officer Employee Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?	17a	\vdash	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$			

Schedule G (Form 990 or 990-EZ) 2009

2 Employer identification number 48-1017759 OMB No 1545-0047 Open to Public **Inspection** (h) Purpose of grant or assistance X 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 ame and address of organization (b) EIN (c) IRC section if applicable respiration (c) IRC section in a sistance respiration (d) Amount of respiration (e) Amount of respiration (book, appraisal, assistance respiration (d) Amount of respiration (d) Amount of respiration (e) Amount of respiration (hook, appraisal, assistance respiration (d) Amount of respiration (e) Amount of respiration (f) Method of respiration (hook, appraisal, assistance respiration (hook, appraisal, assistance respiration (hook) res Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ▶ Attach to Form 990. Schools Foundation The Topeka Public General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part II Parti

١,

3 Enter total number of other organizations
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

26

Page 2 (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. the Foundation has Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information all grants The Board of Directors approves all allocation to be made to persons who meet the requirements set forth in the for board approval, (d) Amount of non-cash assistance 0 The Allocations Committee of The Topeka Public Schools Foundation 67,169 (c) Amount of cash grant 60 the responsibilty to review and recommend, (b) Number of recipients to disbursement of funds. Line 2: (a) Type of grant or assistance Foundation's By-Laws. Part I, Educational Activities Schedule 1 (Form 990) 2009 grants prior Topeka USD Schools Topeka, KS 66611 Schedule I, 624 S.W. 24th Part III

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48-1017759

(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.

2009
Open to Public Inspection

Name of the organization

The Topeka Public Schools Foundation	48-1017759
Form 990, Part I, Line 1, Description of Organization Mis	ssion:
community and its public schools.	
Form 990, Part III, Line 4d, Other Program Services:	
Outdoor Environmental Education Summer Day Camp. An env	ironmental
education program for students currently in grades 3-8.	A week long
camp that is offered for four weeks and served up to 240	students.
Expenses \$ 2237. including grants of \$ 2237. Revenue	\$ 0.
Lewis Mills Avondale East Book Club	
Expenses \$ 202. including grants of \$ 202. Revenue \$	0.
Anderson Trust Grant	
Expenses \$ 1028. including grants of \$ 1028. Revenue	\$ 0.
Dryer Scholarship	
Expenses \$ 250. including grants of \$ 250. Revenue \$	0.
Susan K. Rogers Scholarship	
Expenses \$ 750. including grants of \$ 750. Revenue \$	0.
Lewis Mills Teacher Grant	
Expenses \$ 800. including grants of \$ 800. Revenue \$	0.
Claire Fisher Inspirational Award	
Expenses \$ 500. including grants of \$ 500. Revenue \$	0.

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

Schedule O (Form 990) 2009

932211 02-03-10

(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 Open to Public Inspection

Name of the organization

Employer identification number The Topeka Public Schools Foundation 48-1017759 Lewis Mills Young Readers Book Club Expenses \$ 180. including grants of \$ 180. Revenue \$ 0. Read To Me Expenses \$ 458. including grants of \$ 458. Revenue \$ 0. Orchestra Chicago Symphony Experience Expenses \$ 500. including grants of \$ 500. Revenue \$ 0. Doug Goheen/Mike Callaway Scholarship Expenses \$ 500. including grants of \$ 500. Revenue \$ 0. Dandy Golf Expenses \$ 154. including grants of \$ 154. Revenue \$ 0. Intergrating Photography with Reading including grants of \$ 366. Revenue \$ 0. Expenses \$ 366. Kansas City Premier Experiental Science Learning Expenses \$ 500. including grants of \$ 500. Revenue \$ 0. Family Reading Night Expenses \$ 160. including grants of \$ 160. Revenue \$ 0.

Music Across the Curriculum

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

(Form 990)

4

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.

2009
Open to Public Inspection

Employer identification number Name of the organization 48-1017759 The Topeka Public Schools Foundation Expenses \$ 497. including grants of \$ 497. Revenue \$ 0. Team Bocce Ball for Elementary PE including grants of \$ 29. Revenue \$ 0. Expenses \$ 29. Modernizing to Kill a Mokingbird Expenses \$ 136. including grants of \$ 136. Revenue \$ 0. Jewelry Making / Metalworking including grants of \$ 284. Revenue \$ 0. Expenses \$ 284. Take a Seat Expenses \$ 631. including grants of \$ 631. Revenue \$ 0. Kindergarten Students Visiting Atria Hearthstone including grants of \$ 332. Revenue \$ 0. Expenses \$ 332. The Sixties including grants of \$ 9. Revenue \$ 0. Expenses \$ 9. Avondale East Elementary School including grants of \$ 687. Revenue \$ 0. Expenses \$ 687. Bishop Elementary School Expenses \$ 1850. including grants of \$ 1850. Revenue \$ 0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

SCHEDULF O

(Form 990)

Department of the Treasury

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public

Attach to Form 990. Inspection Internal Revenue Service Name of the organization Employer identification number The Topeka Public Schools Foundation 48-1017759 Highland Park Elementary School Expenses \$ 810. including grants of \$ 810. Revenue \$ 0. Linn Elementary School Expenses \$ 510. including grants of \$ 510. Revenue \$ 0. Lundgren Elementary School Expenses \$ 1905. including grants of \$ 1905. Revenue \$ 0. McClure Elementary School Expenses \$ 2547. including grants of \$ 2547. Revenue \$ 0. Quincy Elementary School Expenses \$ 1187. including grants of \$ 1187. Revenue \$ 0. Ouinton Heights Elementary School Expenses \$ 832. including grants of \$ 832. Revenue \$ 0. Ross Elementary School Expenses \$ 1595. including grants of \$ 1595. Revenue \$ 0. Scott Elementary School Expenses \$ 1537. including grants of \$ 1537. Revenue \$ 0. Stout Elementary School Expenses \$ 1150. including grants of \$ 1150. Revenue \$ 0.

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

(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 Open to Public Inspection

Name of the organization Employer identification number 48-1017759 The Topeka Public Schools Foundation Whitson Elementary School Expenses \$ 4442. including grants of \$ 4442. Revenue \$ 0. Williams Elementary School Expenses \$ 2285. including grants of \$ 2285. Revenue \$ 0. French Middle School Expenses \$ 2682. including grants of \$ 2682. Revenue \$ 0. Topeka West High School Activity Fund Expenses \$ 50. including grants of \$ 50. Revenue \$ 0. Yoga Mats Expenses \$ 190. including grants of \$ 190. Revenue \$ 0. Highland Park High School "Starmites" Expenses \$ 2286. including grants of \$ 2286. Revenue \$ 0. Dr. Suess books including grants of \$ 220. Revenue \$ 0. Expenses \$ 220. "Images 2008: Focusing on the Future" Expenses \$ 220. including grants of \$ 220. Revenue \$ 0. Compose, Move, Sing, and Play with the At-Risk Sudent Promoting

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

(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.

2009
Open to Public Inspection

Name of the organization Employer identification number The Topeka Public Schools Foundation 48-1017759 Cultural Acceptance Expenses \$ 682. including grants of \$ 682. Revenue \$ 0. Coaching and Collaborating Our Way to the Top Expenses \$ 901. including grants of \$ 901. Revenue \$ 0. Building Blocks including grants of \$ 459. Revenue \$ 0. Expenses \$ 459. Technology Fun for Everyone Expenses \$ 433. including grants of \$ 433. Revenue \$ 0. Lego Robotics Kits Expenses \$ 559. including grants of \$ 559. Revenue \$ 0. Whitson Band Mallet Percussion Expenses \$ 450. including grants of \$ 450. Revenue \$ 0. Electric Wiring Lab Expenses \$ 480. including grants of \$ 480. Revenue \$ 0. MP3 Players and Video Cameras in the Classroom to Improve Reading Fluency Expenses \$ 1004. including grants of \$ 1004. Revenue \$ 0.

Animal and Plant Interdependence

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

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury

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

Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service Name of the organization **Employer identification number** The Topeka Public Schools Foundation 48-1017759 Expenses \$ 487. including grants of \$ 487. Revenue \$ 0. Project Background Group Expenses \$ 412. including grants of \$ 412. Revenue \$ 0. Astronomical Research in the Public Schools Expenses \$ 997. including grants of \$ 997. Revenue \$ 0. iPod Learning Station Expenses \$ 300. including grants of \$ 300. Revenue \$ 0. iPod Touch in the 21st Century Math Classroom Expenses \$ 358. including grants of \$ 358. Revenue \$ 0. Respect, Responsibilty, and Good Decisions Expenses \$ 1000. including grants of \$ 1000. Revenue \$ 0. Topeka West Charger Band including grants of \$ 300. Revenue \$ 0. Expenses \$ 300. Form 990, Part VI, Section B, line 11: The Form 990 is reviewed by the President, Treasurer and Secretary. Form 990, Part VI, Section B, Line 12c: The conflict of interest policy is reviewed at the beginning of the year.

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

(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.

2009
Open to Public Inspection

Name of the organization The Topeka Public Schools Foundation	Employer identification number 48-1017759
Form 990, Part VI, Section C, Line 19: The Foundation mak	es its Form 990
available for public inspection if anyone requests to see	the Form.
Financail statements are not avialable to the general pub	lic, but are
available to all members of the Boad of Directors.	
	, ,,,,

Form **8868**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

III CITIAI NOVI	inte a separate application for each return		<u> </u>	
• If you a	are filing for an Automatic 3-Month Extension, complete only Part I and check this box are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously fi			▼ X
		ieu ro		
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corpora	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com y	plete		▶ □
	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar ome tax returns	exter	nsion of time	
noted bel (not autor you must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronimatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file tov/efile and click on e-file for Charities & Nonprofits.	cally if	f (1) you want the ated Form 990-T	additional
Type or print	Name of Exempt Organization	Emp	loyer identificati	on number
	The Topeka Public Schools Foundation	4	8-101775)
File by the due date for	Number, street, and room or suite no. If a P O box, see instructions			
filing your return See	P.O. Box 5883			
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions Topeka, KS 66605			
Check ty	pe of return to be filed (file a separate application for each return)			
Fon	m 990	227 069		
Teleph If the c	Pamela Johnson-Betts blocks are in the care of ► 624 S.W. 24TH - Topeka, KS 66611 one No ► (785) 295-3018 FAX No ► briganization does not have an office or place of business in the United States, check this box s for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the . If it is for part of the group, check this box ► and attach a list with the names and EINs of all			
ıs fo ►[►[quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt August 15, 2010 , to file the exempt organization return for the organization named a protection of the organization return for the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named a protection of time unto the organization return for the organization named and the organization named and the organization return for the organization named and the or	bove	The extension · Change in accou	
2 If th	is tax year is for less than 12 months, check reason Initial return Final return		Change in accou	nting period
	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any refundable credits. See instructions	За	S	
	is application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
	payments made Include any prior year overpayment allowed as a credit	3b	\$	
	cance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, osit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)			
	Instructions	3c	\$	N/A
Jaution.	f you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	გგ /9∙	EO for payment ii	nstructions
HA E	or Privacy Act and Paperwork Reduction Act Notice see Instructions		Form sees	(Rev 4-2009)