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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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	For the	2009 calend	lar year,	or tax year beginning	]	, ,	2009, an	d endin	g		
В		applicable		C Name of organization	-					D Employer Ide	ntification Number
	L*-1	ress change	Please use IRS label	EDMOND PUBLI	C SCHOOLS	FOUNDAT	ION,	INC.		73-121	0460
	Nan	ne change	or print or type.	Number and street (or				Room/si	uite	E Telephone nu	mber
	Initia	al return	See specific	P.O. BOX 310	3					(405)	340-3448
	Terr	nınatıon	Instruc- tions	City, town or country			State ZIF	code + 4			
	Ame	ended return		EDMOND			OK 7	3083		G Gross receipts	s \$ 273,311.
	ПАрр	lication pending	F Name a	and address of principal offi	cer				H(a) Is this	a group return for a	offiliates? Yes X No
	_		MIKE V	VILEY P.O. BO	X 3103 EDN	MOND	OK 7	3083		affiliates included?	
1	Tax-e	exempt status	x 501	(c) (3 ) <b>&lt;</b> (ins	sert no )	4947(a)(1)	or !	527	II NO,	attach a list (see i	nstructions)
J		site: > N/Z		······································	· · · · · · · · · · · · · · · · · · ·	·			H(c) Group	exemption number	<b>•</b>
ĸ	Form o	of organization	X Corpora	ation Trust As	sociation Other	. >	L Year	of Format	ion 198	4 M State o	f legal domicile OK
Pa	rt I	Summa									
			_	anization's mission o	r most significa	nt activities	EDUC	ATIO	NAL FU	NDING:	
ø	3	THE EDMO	ND PUE	LIC SCHOOL F	MOITAGNUO	OPERATE	S FOR	THE	PURPOS	E OF SUP	PLEMENTING
Governance		THE FUND	ING OF	SPECIAL PRO	JECTS FOR	THE EDM	OND PI	DBLIC	_ всно	L SYSTEM	. ITS MAJOR
e.r	_	. – – – – –									ONCERNED PARTIES.
<u>3</u>		Check this box		if the organization di			disposed	of more	e than 25'		•
જ			•	bers of the governing		•	luna 1h)			3	16
ties				t voting members of t yees (Part V, line 2a)		ouy (Fait Vi,	ille (b)			5	0
Activities &				eers (estimate if nece						6	20
Ac				usinėss revenue fron		mn (C), ine	12			7 8	0.
	b١	let unrelated	business	taxable income from	Form 990-T, lir	ne 34				71	o
									P	rior Year	Current Year
•	8 (	Contributions	and gran	ts (Part VIII, line 1h)					_	201,505	
Revenue	9 _ [	9 Program-service revenue (Part VIII, line 2g) 10 Investment-income (Part VIII, (column (A), lines 3, 4, and 7d)								-	
eve	10 <b> </b> li									-299,696.	196,854.
ш				I, column (A), lines 5					ļ		-3,334.
		1 2 North 3 " 50'- 1 " F )								-98,191.	268,432.
				ounts pá@ (Part IX, c							19,550.
				nembers (Part IX, co							ļ
se				s <del>ation; em</del> ployee bei			ines 5-10	))	ļ	14,850.	17,550.
sus	16a F	Professional fi	undraisin	g fees (Part IX, colur	nn (A), line 11e)	)					<del> </del>
Expenses	bТ	otal fundraisi	ng expen	ses (Part IX, column	(D), line 25) >			250.			>
	17 C	Other expense	es (Part I	X, column (A), lines	11a-11d, 11f-24	f)				163,721.	4,203.
	18 T	otal expense	s Add Iır	es 13-17 (must equa	l Part IX, colum	in (A), line 2	5)			178,571.	41,303.
	19 F	Revenue less	expenses	Subtract line 18 fro	m line 12					-276,762.	227,129.
8 8									Begir	nning of Year	End of Year
Not Assets or Fund Balancos	20 T	otal assets (F	Part X, Iır	ne 16)						997,817.	1,234,756.
A P	21 T	otal liabilities	(Part X,	line 26)						0.	9,810.
ž	22 N	let assets or	fund bala	nces Subtract line 2	1 from line 20					997,817.	1,224,946.
Pa	rt II	Signatu	re Bloc	k					_		
		Under penalties	of perjury,	declare that I have examin Declaration of preparer (of	ed this return, includ	ling accompanyi	ng schedule:	s and state	ements, and	to the best of my k	nowledge and belief, it is
		alle, correct, an	io Complete	Declaration of preparer (or	nie den dincer) is d	ased on an inion	nation of wi	пст ргера	rer nas any i	knowledge	4
Sig		•	/0	nya C	Uffn	un				1///2/	10
He	re	Signature o	officer	1/1/	Colo	,	100		Da	te /	( )
			$2/\sqrt{X}$	# 67	IMHN	-/	XU.	3/	EŁ		·
		Type or prii	nt name and	Jule Common Comm	7		1 1				
Dai			11/	$\Lambda \setminus \Lambda$	TIM		Date	1	Ch	neck if	Preparer's identifying number (see instructions)
Pai Pre		Preparer's signature	Sky	V V	UXX		-14/	101		nployed 🏲 🔲	P00763379
	er's	ļ		- ara ps	<u> </u>	·	111	<u>'``</u>	-		1 -0 100 17
Üs	е	Firm's name (or yours if self-			CIATES PC					73~	185084
On	ly	employed), address, and		N BRYANT AVE			2024	6056	EI	N F	77.000
	the ID	ZIP + 4	EDMO				3034-	6276_	Pt	none no <u>(40</u>	
iviay	the IR	o aiscuss this	return w	ith the preparer show	vn above / (see	instructions)			_		X Yes No

_	990 (2009) EDMOND PUBLIC SCHOOLS FOUNDATION, INC.	/3-121046	0		Page 2
Pa	rt III Statement of Program Service Accomplishments				
1	Briefly describe the organization's mission				
	EDUCATIONAL FUNDING:				
	THE EDMOND PUBLIC SCHOOL FOUNDATION OPERATES FOR THE PURPOSE OF SU	JPPLEMENT!	NG		
	See Form 990, Page 2, Part III, Line 1 (continued)		- <b>-</b> -		
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				
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	,7	Yes	$\mathbf{x}$	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 e and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allo expenses, and revenue, if any, for each program service reported	expenses Sections to other	on 501 s, the	(c)(3) total	
4 a	a (Code) (Expenses \$19,550. including grants of \$19,550.) (Re	venue \$			0.)
	SUPPORT OF EDMOND PUBLIC SCHOOLS				
					· <b></b> -
4 b	) (Code) (Expenses \$ including grants of \$) (Rev	venue \$			)
		<b></b>			
		<b></b>			
					. – – –
		<del>-</del>			
4 c	(Code) (Expenses \$ including grants of \$) (Rev	/enue <b>\$</b>			)
					- <del></del>
4 d	Other program services (Describe in Schedule O )				
	(Expenses \$ including grants of \$ ) (Revenue \$			)	
	Total program service expenses ► 19.550.			<del>,</del>	

Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A 1 Х Is the organization required to complete Schedule B, Schedule of Contributors? 2 Х 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 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II 4 Х 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 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. 6 Х 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 X 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 Х 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 X 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 X 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12 X 12 A Was the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional X Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a х 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 14b Х 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 15 х 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 16 Х 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 17 Х 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 18 Х 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

Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

X

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Form 990 (2009) EDMOND PUBLIC SCHOOLS FOUNDATION, INC.

Part IV > Checklist of Required Schedules (continued)

			Yes	No
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	
22	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	22	х	
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23		х
24	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, go to line 25.	24a		х
l	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
,	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
	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
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
;	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		х
١	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
(	An entity of which a current or former officer, director, trustee, or key employee 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	х	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	-	<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-3 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		_x_
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>x</u> _
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?  Note. All Form 990 filers are required to complete Schedule O	38	x	
ВАА		Form	990 (	2009)

Form 990 (2009) EDMOND PUBLIC SCHOOLS FOUNDATION, INC. 73-1210460 Page 5 Statements Regarding Other IRS Filings and Tax Compliance No Yes 1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 1 a 0 b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 b c'Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1 c X 2 a 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 0 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by X this return 3a b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a 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 **Emancial Accounts** 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b Х 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? 5с 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? 6a X b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6ь 7 Organizations that may receive deductible contributions under section 170(c). 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? 7 a Х b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file 7с Х d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal 7е benefit contract? Х f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 f Х g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? 7 g h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? 7h Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9a b Did the organization make any distribution to a donor, donor advisor, or related person? 9b

10 Section 501(c)(7) organizations. Enter

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 Section 501(c)(12) organizations. Enter

a Gross income from other members or shareholders

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

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

b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year

		77	
	10a	, ** , **	
	10b	۔	
		2	
	11a	-	
t	11 Ь	,	
ı of	Form 1041?	12a	
	12b	ڎ	

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Form 990 (2009)

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	ction A.	Governing	Body ar	ıd Ma	mage	emer	nt .		_										_			
		Jovenning	_ <u> </u>	11144																Y	es	No
1:	a Enter the	number of votin	ng membe	rs of th	ne gov	vernin/	g bod	ly							1 a	16				1		-
		number of votir	_		•		-	-							1 b	16						Į
2	Did any o	ifficer, director, rector, trustee o	trustee, or	key er	mploy	ee ha	ve a f	famıl	ly rela	ation	iship (	or a bu	usines	s rela	tionsl	nıp with	any o	other	2	- -	$\dashv$	
3	Did the or	rganization dele	gate contr	rol over	r mana	agem	ent du	uties	custo	omar	rily pe	erforme	ed by o	or uno	der th	e direc	t supe	rvision	3			
4		s, directors or tr rganization mak		-				_				-	mer pe	erson	•				4	_	$\dashv$	<u>^</u>
4		prior Form 990	, ,		Criani	yes to	) IIS U	nyan	1120110	Jilai (	docui	HEHRS								$\dagger$	_	
5		rganization beco			a the v	vear c	of a m	nater	rial div	versi	on of	the or	ganıza	ation's	asse	ets?			5			х
6		organization ha		•	-	-							•						6		x	
7	a Does the	organization ha	ve membe	ers, sto	ckholo	ders,	or oth	ner p	erson	ns wh	ho ma	ay elec	t one	or mo	re m	embers	of the	•	7	a :	x	
1	-	lecisions of the	governing	body s	subjec	ct to a	pprov	al by	y men	mber	s, sto	ckholo	lers, o	r othe	er per	sons?			7	-		х
8	Did the or	rganization cont	emporane	ously o	docum	nent th	ne me	eeting	gs he	ld or	r writte	en acti	ions ui	nderta	aken	during	the ye	ar by				
		rnina body?																	8	a :	X	
	,	nmittee with aut	hority to a	ct on b	ehalf	of the	gove	ernin	g bod	Įγ?			•						8	$\rightarrow$	х	
	Is there a	ny officer, direction's mailing ad	tor or trus	tee. or	kev e	olame	vee lis	sted	ın Pa	art VI	II, Sec	ction A	, who	cann	ot be	reache	ed at th	ne	9			
Sec			This Sec											not r	eau	red b	v the	Interr	-			
	enue Code	•				7											,					
													-							Y	es	No
10	a Does the	organization ha	ve local cl	hapters	s, brar	nches	, or af	ffilia	tes?										10	a		х
1	b If 'Yes,' d and brand	oes the organiz thes to ensure t	ation have heir opera	: writtei ations a	n polic	cies a	nd pro	oced th the	dures ose of	gove f the	erning e orga	the a	ctivitie n?	s of s	such (	chapter	s, affıl	iates,	10	ь		
11	Has the o	rganization pro	vided a co	py of th	his Fo	orm 99	}0 to a	all m	nembe	ers o	of its g	overn	ing boo	dy bei	fore f	iling th	e form	?	11		x	
117	<b>A</b> Describe	ın Schedule O t	he process	s, if an	ıy, use	ed by	the or	rganı	ızatıo	n to	reviev	w this	Form 9	990								
12	a Does the	organization ha	ve a writte	en conf	lict of	intere	est po	olicy?	? If 'N	lo,' g	go to I	ine 13							12	a		<u>x</u>
J	Are office to conflict	rs, directors or	trustees, a	and key	y empl	loyees	s requ	uıred	to di	sclos	se an	nually	ıntere	sts th	at co	uld give	e rise		12	ь		
(		organization red O how this is d		d consi	stently	y mon	utor a	and e	enforc	e co	mplia	ince w	ith the	polic	y? If	'Yes,' (	describ	oe ın	12	с		
13	Does the	organization ha	ve a writte	en whis	stleblo	wer p	olicy?	7											13			X
14	Does the	organızatıon ha	ve a writte	en docu	ument	reten	ition a	and c	destru	uction	n poli	cy?							14	$\perp$	_	<u> </u>
15	Did the pi persons,	rocess for deter comparability d	mining corata, and co	npensa ontemp	ation o	of the eous s	follow substa	wing antia	perso ition o	ons ii of the	ınclud e delib	e a rev peratio	view ai n and	nd ap decis	on?	al by in	depen	dent		-	. :	, "
ā	The organ	nization's CEO,	Executive	Directo	or, or	top m	ianag	eme	ent offi	icial									15	a		<u> </u>
1		cers of key emp		-	•														15	b	_	X
	If 'Yes' to	line 15a or 15b	, describe	the pre	ocess	in Sc	hedul	le O	(See	e inst	tructio	ons )								1.	- 1	
16 a		ganization inve ing the year?	st in, contr	ribute a	assets	s to, o	r part	ticipa	ate in	a joi	ınt ve	nture (	or simi	lar ar	range	ement	with a	taxable	16	سر		X
	•		tion adopt	ad a w	rutton	policy	, or n.		duro r	<b>.</b>	ırına t	ho ora	anızat	ion to	. oual	unto iti	- nortu	na etion		7 7	41	151
	in joint ve	as the organiza inture arrangem h respect to suc	ents unde	r applic	cable	federa	al tax	law,	, and	take	en ste	ps to s	safegua	ard th	e org	anızatı	on's e	xempt	16		***	Ê
Sec		Disclosures																				
17	List the st	ates with which	a copy of	this Fo	orm 99	90 is i	requir	red to	o be f	filed	<b>-</b> (	Okla	homa	<u> </u>								
18	inspection	104 requires an Indicate how	you make	these a	avaılal	able C	rms 1 Check	all t	hat ap	pply			e), 990	), and	990-	T (501	(c)(3)s	only) a	avaılabl	e foi	put	olic
10		website		ther's				<u> X</u>	•		eques									. ,		
	statement	in Schedule O v ts available to th	ne public								_		_					·	-		ancı	al
		name, physical FILLEY	address, a		lephon				e per		who p		ses th	e boo O¥		nd reco 7308		_	anızatıd (405)		0 - 2	819
										-												

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) (B) (c)							(D)	(E)	(F)	
Name and Title	Average hours					hat app		Reportable compensation from	Reportable compensation from	Estimated
	per week	ridivide al francee	mshinbonal kustee	Offic er	Any employee	High est สหกฎะกระสะช employee	r (Arne)	compensation from the organization (W 2/1099-MISC)	compensation from related organizations (W 2/1099-MISC)	amount of other compensation from the organization and related organizations
SUSAN ADAMS							П			
TRUSTEE	1.00	х						0.	0.	0.
DEAN ATKINSON										
TRUSTEE	1.00	х						0.	0.	0.
KELLY BRANDER										
TRUSTEE	1.00	х	Ĺ.,					0.	0.	0.
TONYA COFFMAN									_	
PRESIDENT-ELECT	1.00	х		x				0.	0.	0.
TIM DEIMUND										
TRUSTEE	1.00	x						0.	0.	0.
MARY DRAKE										
TRUSTEE	1.00	Х						0.	0.	
RONDA HALL										
TRUSTEE	1.00	х						0.	0.	0.
DARIN KENT										
TRUSTEE	1.00	х						0.	0.	0.
TODD LISLE										
TRUSTEE	1.00	X						0.	0.	0.
GLEN MAYNARD										
TRUSTEE	1.00	Х						0.	o.	0.
JOHN OSBORNE										
TRUSTEE	1.00	Х				_		0.	0.	0.
PATRICK PARSONS										
TRUSTEE	1.00	Х						0.	0.	0.
LANCE ROBNETT										
TRUSTEE	1.00	х						0.	0.	0.
RANDY ROPER		·								
TRUSTEE	1.00	х						0.	0.	0.
BRETT THOMPSON										
SECRETARY/TREASURER	1.00	х		x					0.	0.
MIKE WILEY										
PRESIDENT	1.00	х		x	1		_ ]	0.	0.	0.
KAREN FILLEY				$\neg$						
		1	- 1	- 1			- 1			

Pa	rt VIII   Statement of Revenue		· · · · · · · · · · · · · · · · · · ·		T
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	Ta Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribns included in lns la-lf h Total. Add lines la-lf  Business Code  2a b c	74,912.			,
PROGRAM SERVICE REVENUE	de				
	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less rental expenses	196,854.	196,854.	0.	0.
	c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less cost or other basis and sales expenses  c Gain or (loss)		,		
OTHER REVENUE	8a Gross income from fundraising events (not including \$ 13,140. of contributions reported on line 1c) See Part IV, line 18 a 1,545. b Less direct expenses b 4,879.				
	c Net income or (loss) from fundraising events  9a Gross income from gaming activities See Part IV, line 19  b Less direct expenses c Net income or (loss) from gaming activities	-3,334.	-3,334.	0.	0.
	10 a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory				•, •
	Miscellaneous Revenue  Business Code  11 a  b  c  d All other revenue				
	e Total. Add lines 11a-11d	····		,	-
	12 Total revenue. See instructions	268,432.	193,520.	0.	0.

Part IX | Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b. 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5,300.	5,300.		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	14,250.	14,250.		
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	17,550.	0.	17,550.	0.
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)	•			
á	Management .				
t	Legal				
(	Accounting				<del></del>
c	<b>I</b> Lobbying				
6	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				
ç	Other				
12	Advertising and promotion				
13	Office expenses	2,511.	0.	2,511.	0.
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				
	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	\$ 1.00 miles			
	below)	¥2	4 / 2	*,	,
а	MISCELLANEOUS	1,442.	0.	1,442.	0.
b	POSTAGE	250.	0.	0.	250.
C					
d					
е					
	All other expenses	·			
	Total functional expenses Add lines 1 through 24f	41,303.	19,550.	21,503.	250.
26	Joint costs. Check here  J 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>		

Page 11

Part X Balance Sheet (A) Beginning of year End of year 1 150,102 171,315. Cash - non-interest-bearing 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L Notes and loans receivable, net 7 8 Inventories for sale or use 8 9 9 Prepaid expenses and deferred charges 10 a 10 a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10b b Less: accumulated depreciation 10 c 748,486. 11 912,591. 11 Investments - publicly-traded securities 12 Investments - other securities See Part IV, line 11 12 13 13 Investments - program-related See Part IV, line 11 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 150,850. 99,229 16 Total assets Add lines 1 through 15 (must equal line 34) 997,817. 16 1,234,756. 17 17 Accounts payable and accrued expenses 3,810. 18 Grants payable 0. 18 6,000. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 25 9,810. Total liabilities. Add lines 17 through 25 0. 26 N E T Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 27 Unrestricted net assets 27 809,479. 1,000,698. 28 Temporarily restricted net assets 188,338. 28 224,248. 29 Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117, check here and complete 6 lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, and equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32

BAA

33

34

Total net assets or fund balances

Total liabilities and net assets/fund balances

1,234,756. Form 990 (2009)

1,224,946.

997,817.

997,817.

33

34

Tare XI   I mancial Statements and reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			鐢
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?	2a		x
b Were the organization's financial statements audited by an independent accountant?	2Ь	х	
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?	<u>?</u> c	x	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			مير. ماريد ماريد
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.			
X Separate basis Consolidated basis Both consolidated and separate basis	<b>1</b> §	2.3	7
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?	3 a		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	ь		

ВАА

Form 990 (2009)

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

EDM	ONI	PUBLIC SCH	OOLS FOUNDATI	ON, INC.						73-1	210460	<u> </u>		
Parl	1	Reason for Pu	blic Charity Statu	ıs (All organ	iizations	must o	comple	te this	part.)	See ı	nstruct	ions		
The c	rgar	nization is not a priv	vate foundation becau	se it is (For lin	es 1 throug	gh 11, cl	heck ont	y one b	ox)					
1		A church, convention	on of churches or ass	ociation of chur	ches desci	ribed in :	section	170(b)(1	)(A)(i).					
2		A school described	in section 170(b)(1)(	A)(ii). (Attach S	Schedule E	.)								
3		A hospital or coope	erative hospital service	e organization o	described i	n sectio	n 170(b)	<b>(1)(A)(</b> ii	i).					
4		A medical research	n organization operate	d in conjunction	n with a ho	spital de	escribed	ın secti	ion 170(	b)(1)(A)	(iıi) Ente	er the hosp	ıtal's	
		name, city, and sta					. <b></b>							
5		170(b)(1)(A)(iv). (C								nental L	ınıt descr	ribed in sec	ction	
6 7	Ħ	An organization that	local government or eat normally receives a (A)(vi). (Complete P	substantial pai						or from t	he gener	ral public d	escrib	ed
8		A community trust	described in section 1	170(b)(1)(A)(vi).	(Complete	e Part II	)							
9	_	from activities relationvestment income	at normally receives ( ted to its exempt funct and unrelated busine e section 509(a)(2). (C	tions – subject ss taxable inco	to certain me (less s	exception	ons, and	(2) no r	nore tha	an 33-1/	3 % of its	s support fr	om gr	oss
10		An organization org	ganized and operated	exclusively to t	est for pub	lic safet	y See s	ection 5	509(a)(4	).				
11	_	more publicly supp describes the type	ganized and operated orted organizations d of supporting organiz	lescribed in sec ation and comp	tion 509(a) olete lines	)(1) or s 11e thro	ection 5 ough 11h	09(a)(2) <sub>ı</sub> .	See s	or carry ection 5	09(a)(3).	purposes of Check the	of one box t	or hat
	a Type I b Type II c Type III – Functionally integrated d X Type III – Other													
е	_	By checking this bothan foundation ma 509(a)(2)	ox, I certify that the or- anagers and other that	ganization is no n one or more p	ot controlle oublicly sup	d directl pported	y or indi organiza	rectly by itions de	y one or escribed	more d in secti	isqualifie on 509(a	ed persons (1) or sec	other tion	
f		If the organization in check this box	received a written det	ermination from	the IRS th	nat is a '	Type I, 1	Type II o	r Type I	II suppo	orting org	anization,		
g		Since August 17, 2	006, has the organiza	tion accepted a	iny gift or	contribu	ition fror	n any of	the foll	owing p	ersons?			
													Yes	No
			directly or indirectly overning body of the si			ogether v	with pers	sons des	scribed	ın (ıı) an	ıd (III)	11 g (i)		
		. 3	nber of a person desc	,								11g (ii)	<del>                                     </del>	
		• •	lled entity of a person	• • • • • • • • • • • • • • • • • • • •		ove?						11 g (iii)	-	
h		• •	ng information about the	•								119(11)		
<u></u>	_	Name of Supported Organization	(iı) EIN	(iii) Type of org (described on above or IRC (see instruc	ganization lines 1-9 Section	(iv) organizat (i) listed	Is the tion in col d in your erning ment?	the organ	rou notify sization in (i) of upport?	organizat (i) organi	is the ion in col zed in the S ?	(vii) Amour	nt of Sup	port
						Yes	No	Yes	No	Yes	No			
E	омо	D PUBLIC SCHOOLS	73-6021168	6		х		х		х			19,5	550.
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ratal	_					and the second		2 - 3	* * * * * * * * * * * * * * * * * * *					

Schedule A (Form 990 or 990-EZ) 2009 EDMOND PUBLIC SCHOOLS FOUNDATION, INC. 73-1210460

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

	(Complete only if you checke	ed the box on line	5, 7, or 8 or Part	1)			
	ction A. Public Support		<del></del>	<del></del>	T	<del></del>	<del>-</del>
beg	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
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, column (f)			*			
6	Public support. Subtract line 5 from line 4	•	,				
Sec	tion B. Total Support	· · · · · · · · · · · · · · · · · · ·					
	ndar year (or fiscal year nning ın) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ties, etc (see inst	tructions)			12	
13	First five years. If the Form 990 i organization, check this box and		tion's first, second	d, third, fourth, or	fifth tax year as	a section 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	blic Support P	ercentage				
	Public support percentage for 200	•	• •	e 11, column (f)		14	%
15	Public support percentage from 2	008 Schedule A, F	Part II, line 14			15	%
16 a	33-1/3 support test $-$ 2009. If the and stop here. The organization $\alpha$	organization did qualifies as a publ	not check the box icly supported org	on line 13, and t janization	he line 14 is 33-1	/3 % or more, chec	k this box ►
b	33-1/3 support test — 2008. If the and stop here. The organization of	organization did i qualifies as a publ	not check a box o icly supported org	n line 13, or 16a, ianization	and line 15 is 33-	1/3% or more, chec	k this box
17 a	10%-facts-and-circumstances teror more, and if the organization in the organization meets the 'facts-	neets the 'facts-ar	nd-circumstances'	test, check this be	ox and stop here.	Explain in Part IV	how ►
b	10%-facts-and-circumstances ter or more, and if the organization norganization meets the 'facts-and	neets the 'facts-ar	id-circumstances'	test, check this be	ox and stop here.	Explain in Part IV	ns 10% how the
18	Private foundation. If the organiz						ctions ►
BAA						hedule A (Form 99	

Cale	endar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009		(f) Total
9	Amounts from line 6							
10	a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources							
l	b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
(	c Add lines 10a and 10b						T	
11	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (add Ins 9, 10c, 11, and 12)	7 12		,	, <u>e</u>			
14	First five years. If the Form 990 organization, check this box and	is for the organizat stop here	tion's first, second	l, third, fourth, or	fifth tax year as a	a section 501(c)	(3)	<b>-</b>
Sec	tion C. Computation of Pu	blic Support P	ercentage					
15	Public support percentage for 20	09 (line 8, column	(f) divided by line	13, column (f))		15	; T	-
16	Public support percentage from 2	2008 Schedule A, F	Part III, line 15			16	;	9
Sec	tion D. Computation of Inv	estment Incom	ne Percentage	;	<del></del>			
17	Investment income percentage for	or 2009 (line 10c, c	column (f) divided	by line 13, colum	ın (f))	17	,	9
18	Investment income percentage fr	18	;					

19 a 33-1/3 support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not

b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18

more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Schedul	e A	Form	990 or	990-E	Z) 2009	EDMC	ОMO	PUBLIC	SCH	OOLS	FOU	NDATI	ON,	INC.	73-	1210	460	F	Page 4
Part I	∕ હૈ	Supp ⊇art I	lemer	ntal li	nforma	ation. C	omp	lete this III, line 1	part t	to pro	vide t	he exp	plana	tions re	quired	by Pa	art II, I	ine 10;	
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#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

## Supplemental Financial Statements

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545 0047

Employer Identification number

73-1210460 EDMOND PUBLIC SCHOOLS FOUNDATION, INC. Part Marganizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?? Partilla Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements 2b b Total acreage restricted by conservation easements 2 c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year > Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Partগান্থি Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Schedule D (Form 990) 2009 EDMO						73-121			Page 2
Part III Organizations Mainta	ining Collec	tions o	of Art, Histor	rical 1	reasures, or C	ther Similar Ass	ets (c	ontini	леd)
3 Using the organization's acquisition items (check all that apply)	on accession ai	nd other	_		_	are a significant use (	of its co	llection	t
a Public exhibition				excnar	nge programs				
b Scholarly research			e U Other			<del></del>			
c Preservation for future general Provide a description of the organ		tions an	d explain how t	hey furth	ner the organization	on's exempt purpose	ın		
Part XIV  5 During the year, did the organizal assets to be sold to raise funds ra	tion solicit or re	ceive do	nations of art, I	nistorica	I treasures, or oth	ner sımılar	Yes	. [	No
Part IV Escrow and Custodia									
9, or reported an amo	unt on Form	990, F	Part X, line 2	žĭ			, F	art iv,	
1 a Is the organization an agent, trus included on Form 990, Part X?					outions or other as	ssets not	Yes	; [	No
b If 'Yes,' explain the arrangement	in Part XIV and	comple	te the following	table					
						<del>-</del>	Amour	ıt	
c Beginning balance						1c			
d Additions during the year						1 d			
e Distributions during the year	•					1 e			
f Ending balance	•					1f	<del></del>		<del></del>
2a Did the organization include an ai		990, Pa	rt X, line 21?				Yes	·	No
b If 'Yes,' explain the arrangement				-1.157	14- 5 000	D- + D/ 1 10			
Part V   Endowment Funds Co						T	<del>,</del>		
	(a) Current ye		(b) Prior year		(c) Two years back	(d) Three years back	(e)	Four yea	rs back
1 a Beginning of year balance	188,		221,63				ļ		
<b>b</b> Contributions	19,2	270.	35,77	4.			-		
<ul> <li>c Net Investment earnings, gains, and losses</li> </ul>	30,8	890.	-53,67		₹				
d Grants or scholarships	14,2	250.	14,00		<u> કુઈ</u>				
<ul> <li>Other expenditures for facilities and programs</li> </ul>					之 漢				
f Administrative expenses		0.	1,39		riĝ.		ļ		
g End of year balance	224,2	248.	188,33	8. 3					
<ol><li>Provide the estimated percentage</li></ol>	of the year en	d balanc	e held as						
a Board designated or quasi-endow	ment ►		%						
<b>b</b> Permanent endowment ▶	<b></b> %								
	.00%								
3a Are there endowment funds not in organization by	the possession	n of the	organization tha	it are he	eld and administer	red for the		Yes	No
(i) unrelated organizations							3a(i)	Х	ļ
(ii) related organizations							3a(ii)		Х
b If 'Yes' to 3a(II), are the related or	-						3b		<u> </u>
4 Describe in Part XIV the intended									
Part VI Investments-Land, B						<del></del>			
Description of investment	(4		or other basis estment)		st or other s (other)	(c) Accumulated Depreciation	(d)	Book V	alue 
1 a Land	<u> </u>								
<b>b</b> Buildings	<u></u>								
c Leasehold improvements	L								
<b>d</b> Equipment	L								
e Other			- <b></b> L	••					
Total. Add lines 1a through 1e (Column	(d) must equa	l Form 9	90, Part X, colu	mn (B),	line 10(c) )	<u> </u>			
BAA						Sched	ule <b>D</b> (f	orm 99	90) 2009

Schedule D (Form 990) 2009 EDMOND PUBLIC SCH			73-12104	60 Page 3
Part VII Investments—Other Securities See Fo				
(a) Description of security or category (including name of security)	(b) Book value	Cost or	<ul> <li>Method of valuation r end-of-year market</li> </ul>	ı value
Financial derivatives				<del></del>
Closely-held equity interests				
Other		<del></del>		
			<del></del>	
			<del></del>	
		<del></del>		
		· · · · · · · · · · · · · · · · · · ·		
T. I. (0.1 - (1.) - 1.5 - 0.00 Pt 4 V -1 (0.1 - 1.2)				
Total (Column (b) must equal Form 990 Part X, col (B) line 12) ►  Part VIII Investments—Program Related (See F	orm 000 Part V li	no 12\		
	(b) Book value		Mothod of valuation	
(a) Description of investment type	(b) Book value	Cost or	<ul> <li>Method of valuation r end-of-year market</li> </ul>	ı value
				·
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)				
Part IX Other Assets (See Form 990, Part X,				
	scription			(b) Book value
INVESTMENT IN COMMUNITY FOUNDATION				150,850.
			-	
	. <u> </u>			
<del></del>				
	<del> </del>	<del> </del>		
	-			
Total. (Column (b) must equal Form 990, Part X, col (B), lin	e 15)		<b>P</b>	150,850.
Part X Other Liabilities (See Form 990, Part				·
(a) Description of Liability	(b) Amount			
Federal Income Taxes	``		-	
		<b></b>		,
				4
		3+	,	?~,
			* 1	
			f	5 %
			· ·	}.
			•	
			, •	,
				·
Total (Column (b) must equal Form 990, Part X, col (B) line 25)			·	
2 FIN 48 Footpote In Part XIV provide the text of the footpo	to to the example to	inanaial statamanta ti		

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

	dule D (Form 990) 2009 EDMOND PUBLIC SCHOOLS FOUNDATION,		-1210460	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to I	Financial Statements	<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	•	·	268,432.
2	Total expenses (Form 990, Part IX, column (A), line 25)	••		41,303.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			227,129.
4	Net unrealized gains (losses) on investments .			<u> </u>
5	Donated services and use of facilities .			
6	Investment expenses .			
7	Prior period adjustments		Ì	
8	Other (Describe in Part XIV)		ļ	
9	Total adjustments (net) Add lines 4 through 8	•		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3			227,129.
Par	t XII Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements		1	273,311.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.			
a	Net unrealized gains on investments	2 a	J i	
b	Donated services and use of facilities	2 b	]	
С	Recoveries of prior year grants	2c	]	
d	Other (Describe in Part XIV)	2d 4,879.	.]	
е	Add lines 2a through 2d		2 e	4,879.
	Subtract line 2e from line 1		3	268,432.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
	Investments expenses not included on Form 990, Part VIII, line 7b	4a	1 1	
	Other (Describe in Part XIV)	4b	7 .	
	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	268,432.
	t XIII   Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses per	Return	
	Total expenses and losses per audited financial statements	•	1	46,182.
	Amounts included on line 1 but not on Form 990, Part IX, line 25			
	Donated services and use of facilities	2 a		
b	Prior year adjustments	2 b	7 1	
	Other losses	2 c	1 1	
	Other (Describe in Part XIV)	2d 4,879.		
	Add lines 2a through 2d		2e	4,879.
	Subtract line 2e from line 1		3	41,303.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	Investments expenses not included on Form 990, Part VIII, line 7b	4a	, , ,	
	Other (Describe in Part XIV)	4b	7 🖫	
	Add lines 4a and 4b		4c	
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		5	41,303.
	XIV Supplemental Information		<del></del>	
Comp line 4	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part , Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and and an ination	t III, lines 1a and 4, Part IV, I nd 4b Also complete this part	ines 1b and 2b, to provide any	Part V, additional
Pt_	V Line 4 TEMPORARILY RESTRICTED FUNDS ARE TO	BE USED FOR SCHO	LARSHIPS.	
Pt_	XII_Line_2dBOOK/TAX_DIFFERENCE_IN_REPORTING_OF	FUNDRAISING EXPE	nses.	
Pt_	XIII Line 2d BOOK/TAX DIFFERENCE IN REPORTING OF	FUNDRAISING EXPE	NSES.	
		. — — — — — — —		
				<del>-</del>
		. <b></b>	<b></b>	
- <b>-</b>				

Part XIV	Supplemental	Information (co	ntınued)				
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						. <b></b>	
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- <b></b>			<b></b>		<b></b>		
	<u>-</u>	<b></b> -	<del></del>		<del></del>		

Schedule D (Form 990) 2009 EDMOND PUBLIC SCHOOLS FOUNDATION, INC.

73-1210460

Page 5

_		
	SCHEDULE 1 (Form 990)	

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

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990.

OMB No 1545-0047 2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number 73-1210460 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part 1 General Information on Grants and Assistance EDMOND PUBLIC SCHOOLS FOUNDATION, Name of the organization

**≗** □ Part.II. Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Schedule I (Form 990) 2009	Sche	05/10/10	TEEA3901 02/10/10	or Form 990.	e the Instructions fo	uction Act Notice, se	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.
0		ļ			ganizations	3) and government oons	<ul><li>2 Enter total number of section 501(c)(3) and government organizations</li><li>3 Enter total number of other organizations</li></ul>
					-		
SPECIAL PROJEC	n/a	0. FMV	0	5,300.	501(c)3	73-6021168	EDMOND PUBLIC SCHOOLS  1001 W. DANFORTH  EDMOND OK 73003
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section	(b) EIN	1 (a) Name and address of organization or government or government (b) EIN (c) IRC section (d) Amou

Page 2

Schedule I (Form 990) 2009 EDMOND PUBLIC SCHOOLS FOUNDATION, INC.

Part III 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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ROHAN SCHOLARSHIP	1	2,000.	0.	FMV	N/A
STITH SCHOLARSHIP	1	2,000.	.0	FMV	N/A
REES SCHOLARSHIP	1	1,250.	0.	FMV	N/A
HUDSON SCHOLARSHIP	ĸ	9,000.	0.	FMV	N/A
Bartival Supplemental Information. Complete this part to pr	l olete this part to p	rovide the information required in Part	ion required in Par	I, line 2, and	any other additional information.
Pt_I_Line_2THE_GRANTS_ARE	E FIRST AWARDE	D TO THE VARIO	US SELECTED TE	THE GRANTS ARE FIRST AWARDED TO THE VARIOUS SELECTED TEACHERS. THE SELECTED	
Pt_I_Line_2TEACHERS_THEN_	SUBMIT A REQU	ISITION FOR THE	E REQUESTED IT	TEACHERS_THEN_SUBMIT_A_REQUISITION_FOR_THE_REQUESTED_ITEMS_TO_THE_EXECUTIVE	
Pt_L Line_2DIRECTOR. THE	EXECUTIVE DIR	ECTOR THEN MAT	CHES THE REQUE	DIRECTOR. THE EXECUTIVE DIRECTOR THEN MATCHES THE REQUESTED ITEMS TO THE REQUESTED	REQUESTED
Pt_L Line_2ITEMS_IN_THE_G	THE GRANT THE REQ	REQUISITION IS TH	EN_SUBMITIED_T	THEN SUBMITTED TO PURCHASING AND THE TEACHER	THE TEACHER
Pt_I Line 2RECEIVES A PURCHASE	RCHASE ORCHER	ORCHER SO THE ITEMS CAN THEN BE	AN_THEN_BE_ORD	ORDERED. THE FOUNDATION	NOI
Pt 1 Line 2 CONT'D THEN ISSUES A CHECK	CHECK TO THE	SCHOOL DISTRIC	T FOR THE AMOU	TO THE SCHOOL DISTRICT FOR THE AMOUNT OF THE REQUISITIONS	TIONS
SO THE FUNDS C	CAN BE ENCUMBE	RED. DUE TO THE	E AFOREMENTION	ENCUMBERED. DUE TO THE AFOREMENTIONED PROCESS THERE IS A	IS.A
LONG PERIOD OF	OF TIME BETWEEN		EQUEST AND WHE	THE INITIAL REQUEST AND WHEN THE ITEMS ARE ACTUALLY	<u>\ctualdulx</u>
ORDERED. THEREFORE,	PRICES	MAY_VARY_AND_A	CCORDING TO FO	MAY VARY AND ACCORDING TO FOUNDATION POLICY ANY	
OVERPAYMENT IS	KEPT BY THE	SCHOOL DISTRICT AND ANY UNDERPAYMENT	T AND ANY UNDE	RPAYMENT IS REIMBURSED	URSED
BY THE FOUNDATION	rion				
					Schedule I (Form 990) 2009

#### SCHEDULE L (Form 990 or 990-EZ)

**Transactions with Interested Persons** 

► Complete if the organization answered
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Schedule L (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization EDMOND PUBLIC SCHOOLS FOUNDATION, INC. 73-1210460 Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only) Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (b) Description of transaction (a) Name of disqualified person 1 Enter the amount of tax imposed on-the organization managers or disqualified persons during the year under section 4958 Ś Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (f) Approved by board or committee? (a) Name of interested person and purpose (b) Loan to or from the organization? (c) Original principal amount (d) Balance due (e) In default? (g) Written agreement? Τo From Yes No Yes No Yes No Total Ś Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and (c) Amount and type of assistance the organization **Business Transactions Involving Interested Persons.** Complete if the organization answered Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (c) Amount of transaction \$ (a) Name of interested person (b) Relationship between (d) Description of transaction (e) Sharing of organization's revenues? organization Yes No LANCE ROBNETT TRUSTEE/BANKER X TRUSTEE IN MANAGEMENT POSITION OF BA DARIN KENT TRUSTEE/BANKER 0. TRUSTEE IN MANAGEMENT POSITION OF BA Х

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

#### **SCHEDULE O** (Form 990)

## Supplemental Information to Form 990

OMB No 1545-0047

Employer identification number

73-1210460

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

EDMOND PUBLIC SCHOOLS FOUNDATION, INC Pt VI-A, Line 6 THE ORGANIZATION HAS MEMBERS, BUT NOT STOCKHOLDERS. Pt VI-A, Line 7a THE MEMBERS OF THE ORGANIZATION MAY ELECT ONE OR MORE MEMBERS OF THE EXECUTIVE COMMITTEE. Pt VI-B, Line 11A THE ORGANIZATION DOES PROVIDE A COPY OF THE FORM 990 TO ITS EXECUTIVE COMMITTEE PRIOR TO ITS FILING. THE ORGANIZATION'S EXECUTIVE COMMITTEE REVIEWS THE FORM 990 PRIOR TO ITS FILING. Pt VI-C, Line 19 THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. Part I, Line 8 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT Part I, Line 10 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 11 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 12 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 13 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 16b AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 17 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 18 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 19 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 20 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part I, Line 22 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part X, Line 1 Part X, Line 2 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part X, Line 11 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part X, Line 15 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part X, Line 16 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT. Part X. Line 17 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2008 AUDIT ADJUSTMENT.

Schedule O (Form 990) 2009	Page 2
·	Employer (dentification number 73 – 1210460
abnows I obsite behoods I obtained inc.	
Part X, Line 18 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT.
Part X, Line 26 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT.
Part X, Line 27 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT.
Part X, Line 28 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT.
Part X, Line 33 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT.
Part X, Line 34 AMOUNT HAS BEEN CHANGED TO REFLECT LATE 12/31/2	008 AUDIT ADJUSTMENT
	<b></b>
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	·
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	·

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission.

THE FUNDING OF SPECIAL PROJECTS FOR THE EDMOND PUBLIC SCHOOL SYSTEM. ITS MAJOR SOURCE OF REVENUE IS DERIVED FROM CONTRIBUTIONS RECEIVED FROM MEMBERS AND OTHER CONCERNED PARTIES.

Form <b>8868</b>	(Rev 4-2009) EDMOND PUBLIC SCHOOLS FOUNDATION, IN	ic.	73-1210460	Page 2
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this be	ox	► 🛛
Note. Only	complete Part II if you have already been granted an automatic 3-month exten	sion on a previously file	ed Form 8868	
<ul><li>If you a</li></ul>	e filing for an Automatic 3-Month Extension, complete only Part I (on page 1	).		_
Partille	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no	copies needed)	).
	Name of Exempt Organization	C 24 Em	ployer identification numb	er
Type or				
print	EDMOND PUBLIC SCHOOLS FOUNDATION, INC.	73	3-1210460	
<b></b>	Number, street, and room or suite number. If a P.O. box, see instructions	For	IRS use only	
File by the extended due date for				
filing the	P.O. BOX 3103			
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	EDMOND OK 73083			
Check type	of return to be filed (File a separate application for each return)			
X Form 99	00 Form 990-PF	Form 1041-A	Form	6069
Form 99	00-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	Form	8870
Form 99	00-EZ Form 990-T (trust other than above)	Form 5227		
	ot complete Part II if you were not already granted an automatic 3-month ext		filed Form 8868.	
<ul> <li>The boo</li> </ul>	ks are in care of ► EDMOND_PUBLIC_SCHOOLS_FOUNDATION, I	INC.		
Telepho	ne No ► (405) 340-2800 FAX No. ► (405) 340	-2835		
<ul><li>If the or</li></ul>	ganization does not have an office or place of business in the United States, o	check this box		▶ 🗌
<ul><li>If this is</li></ul>	for a Group Return, enter the organization's four digit Group Exemption Numb	ber (GEN)	If thi	s is for the
whole group	, check this box $ ightharpoonup$ If it is for part of the group, check this box $ ightharpoonup$	and attach a list with the	ne names and EINs o	of all
members th	e extension is for			
4 I requ	est an additional 3-month extension of time until <u>Nov 15</u> , 20 <u>1</u>	1 <u>0</u>		
<b>5</b> For ca	llendar year 2009 , or other tax year beginning , 20	, and ending	, 20	
6 If this	tax year is for less than 12 months, check reason	Final return	Change in accounting	ng period
7 State	in detail why you need the extension THE ORGANIZATION REQUE	STS AN EXTENSI	ON OF TIME	<b></b>
TO_	FILE IN ORDER TO OBTAIN AUDITED FINANCIAL STATE	MENTS. THE STA	TEMENTS WILL	ALLOW _
FOR	THE COMPLETE AND ACCURATE PREPARATION OF THE 2	990.	<del></del>	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental fundable credits. See instructions	tive tax, less any	8a \$	0.
<b>b</b> If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable crents made. Include any prior year overpayment allowed as a credit and any ar	redits and estimated tax		
with F	orm 8868		8b \$	0.
c Balan with F	ce Due. Subtract line 8b from line 8a Include your payment with this form, or, TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	, if required, deposit System) See instrs	8c \$	0.
	Signature and Verification			
М	of perjuly, I declare that have examined this form, including accompanying schedules and statement mode, and that I am authorized beginn this form  Title	ts, and to the best of my knowle	T1	6/10
Signature 🕎	Time U	<del> </del>	Date	<u> </u>

BAA

Form 8868 (Rev 4-2009)

# Form **8868**

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 4-2009)

Internal Revenue	Service		File a separate application for each r	etum.			
• If you are	filing for an A	utomatic 3-Month I	extension, complete only Part I and check t	his box	<del> !</del>		► X
			matic) 3-Month Extension, complete only F				
			ly been granted an automatic 3-month exter		d Form 886	8	
Partl.	Automatic :	3-Month Extens	ion of Time. Only submit original (i	no copies needed).			
			equesting an automatic 6-month extension		-	<del>-</del>	▶ ∐
All other corp income tax re	oorations (incli eturns.	ıdıng 1120-C filers),	partnerships, REMICS, and trusts must use	e Form 7004 to request a	ın extension	of time to file	!
returns noted the additiona Form 990-T	l below (6 mor l (not automat Instead, you n	iths for a corporatio ic) 3-month extension oust submit the fully	ectronically file Form 8868 if you want a 3-m n required to file Form 990-T) However, you on or (2) you file Forms 990-BL, 6069, or 88 completed and signed page 2 (Part II) of Fo file for Charities & Nonprofits	a cannot file Form 8868 ( 70. group returns, or a c	electronically	y if (1) you wa r consolidated	ant
	Name of Exempt	Organization			Employer ide	ntification number	7
Type or							
print	EDMOND P	UBLIC SCHOOL	S FOUNDATION, INC.		73-1210	0460	
File by the due date for	Number, street, a	nd room or suite number	If a P O box, see instructions	· <u>-</u> · <u>-</u>			
filing your return See	P.O. BOX		· · · · · · · · · · · · · · · · · · ·				
instructions		office, state, and ZIP cod	e For a foreign address, see instructions				
	EDMOND				OK	73083	
		filed (file a separate	application for each return)	П	_		
X Form 990		-	Form 990-T (corporation)	Form 472			
Form 990		<u>-</u>	Form 990-T (section 401(a) or 408(a) trus	· 🛏			
Form 990		-	Form 990-T (trust other than above) Form 1041-A	Form 606			
1 11 01111 930	2-1 1		1 0HH 1041-A	Form 887	<u>U</u>		
		re of ► <u>EDMOND</u> _ 5)_340-2800	PUBLIC SCHOOLS FOUNDATION,  FAX No ► (405) 3				
			or place of business in the United States, ch				▶ 🗀
_			nization's four digit Group Exemption Number		this is for th	ne whole group	ليا
	s box ► ☐ sion will cover		e group, check this box				•
			s for a corporation required to file Form 990	-D extension of time			
untıl A	ug 16		the exempt organization return for the organ	•			
_	calendar year	•					
	tax year begin		, 20, and ending	, 20			
2 If this ta	ax year is for le	ess than 12 months	check reason:   Initial return	Final return C	hange in ac	counting perio	od
3a If this a nonrefu	pplication is fo ndable credits	r Form 990-BL, 990 See instructions	-PF, 990-T, 4720, or 6069, enter the tentation	ve tax, less any	3a \$		0.
<b>b</b> If this a made. I	pplication is fo nclude any pri	r Form 990-PF or 9 or year overpaymer	90-T, enter any refundable credits and estin t allowed as a credit	nated tax payments	3ь\$		0.
deposit	e <b>Due.</b> Subtrac with FTD coup tructions	t line 3b from line 3 on or, if required, b	a Include your payment with this form, or, i y using EFTPS (Electronic Federal Tax Payi	f required, ment System)	3c \$		0.
Caution. If yo	ou are going to	make an electronic	fund withdrawal with this Form 8868, see F	orm 8453-EO and Form	8879-EO fo	r	

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