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Form **990**

Return of Organization Exempt From Income Tax

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

Open to Public Inspection

Α	For th	ie 2009 c	alendar	r year, o	r tax year	beginning	J	uly 1	, 2009, a	nd endir	ig		e 30		0 10	
В	Check if a	applicable	Please	C Name	of organiza	tion Leave	enworth I	Public Scho	ols Edu	cation F	ounda	tion	D Em	iployer i	dentification n	umber
	Address	change	use IRS label or		Business A	s Leaven	worth Pu	blic Schoo	ls Educa	ation Fo	undatio	on	48	в :	119284	3
	Name c		print or					vered to street a		Room/su			E Tel	ephone r	number	
	Initial re		type. See	P.O. E	3ox 969, 2	200 N 4th	Street						(91	3)	684-140	0
			Specific	City	r town, state			4						· ,		
	Termina		Instruc- tions.	• 1 ′	enworth,	•							G Gm	ss receipt	. •	
= :		ed return	F Nar		ddress of pr			eiger, Presi	dont							(7)
ш,	Application	on pending	1					•	aem						ffiliates? Yes	
	Ť				reet, Leav						— Н(b)				ded? ∐Yes	
		empt status			3)◀ (insert		947(a)(1) or				_	If "No	o," atta	ch a list	(see instruction	ns)
					g/gen/lps			es/						n number		
_				poration L	Trust 🗆 A	ssociation L	Other ►		L Year	of format	ion 20	002	M Sta	te of lega	il domicile. K	<u>S</u>
Pa	art I	Summ														
	1	Briefly de	escribe	e the ord	anization	's missioi	n or most	significant	activities	. The f	oundati	ion w	as fo	rmed a	is a way of	
_		support	ting ed,	lucation	ial efforts	in the Le	eavenwor	th commun	ity that	might n	ot othe	rwise	e bec	ome a	reality. It is	s a
ဦ								dividuals, d								
Ta I		expand	the lea	arning	pportun	lies with	n their c	ommunity.								
ě								itions or dispos	ed of more	than 25%	6 of its no	at acco	te			
Ğ								(Part VI, line						3		
- ಭ													. –	4		27
Activities & Governance								verning bod	y (Part v	i, line ii	0)	•		5		18
흟	5	Total nui	mber o	т етрю	yees (Par	Ky, iine 2	a)					•		6		
ĕ					eers (esti							•				10
								/III, column		12				'a		
	b	Net unre	lated b	usiness	taxable i	ncome fro	m Form	990-T, line (<u> 34</u>	 -	<u>. </u>	_	• •	'b		
	ŀ										Pr	nor Ye			Current Yea	
ø	8	Contribu	tions a	ınd gran	ts (Part V	'III, line 1h)					1	199,78	83	16	7,650
킱	9	Program	service	e reven	ue (Part V	/III, line 2g	3)					2	201,53	39	20	1,030
Revenue	10	Investme	ent inco	ome (Pa	rt VIII, co	lumn (A),	lines 3, 4	, and 7d) .		L			-34,83	35	1	9,134
~								, 9c, 10c, a								
								rt VIII, colum		12)		3	366,48	37	38	7,814
	13	Grants a	nd sım	ular am c	nunts nair	l (Part IX	column (A), lines 1-3	()				109,07	75		2,780
es		4 Benefits paid to or for members (Part IX, column (A), line 4)							144,691		91	16	5,314			
Expenses	1	a Professional fundraising fees (Part IX, column (A), line 11e)									,	-				
Š	1				•			•		- 1				_		
ш			_		•			5) ▶					22.02	24		2 004
								, 11f-24f) .					32,93	_		2,981
								IX, column (A), line 2	25)			286,69	_		1,075
_ 0	19	Revenue	less ex	(penses.	Subtract	line 18 fro	m line 12		<u> </u>				79,7	_		6,739
sets or										Ļ	Beginning	<u> </u>			End of Year	
sset 3ala	20	Total ass	sets (Pa	art X, Iır	1е 16).					-		;	338,48	86	44	2,829
A Ass	:21	Total liat												0		7,604
ž		_			ances. Su	btract line	21 from	line 20				3	338,48	36	43	5,225
Pa	art II	Sign	ature	Block												
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ivia	y tne	iuo aisc	uss this	s return	with the	preparer	snown at	ove? (see II	ISTruction	ns) .					✓ Yes	<u> No</u>

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

Form **990** (2009)



Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: The Leavenworth Public Schools Education Foundation is an independent non-profit organization governed and driven by a volunteer Board of Directors. The mission of the Foundation is to develop resources to enhance and expand educational opportunitites, to create long-term permanent investment funds for the pupose of generating annual income and to encourage community understanding and support for the Leavenworth 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?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
	Total program service expenses ▶

Pai	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	\	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	✓	
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		\
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		√
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
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		√
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		✓
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	✓	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12		✓
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		✓
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		√
<u> 20</u>	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		<u> </u>

Pa	T 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		1
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		1
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		1
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 Schedule K. If "No," go to line 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	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		✓
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
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		✓
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		√
28	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	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		√
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		√
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
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		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
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		✓
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		1
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		. ✓
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		<u>,</u>

Par	t V Statements Regarding Other IRS Filings and Tax Compliance		•	
			Yes	No
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2a 18			ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		✓
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
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.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		-
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	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		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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?	7a 7b		✓
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	70		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If "Yes" indicate the number of Forms 8282 filed during the year.	7c		✓
	If "Yes," indicate the number of Forms 8282 filed during the year			
	benefit contract?	7e		1
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
_	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		/
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		1
8	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 holdings at any time during the year?	8		✓
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a 9b		✓
	Did the organization make a distribution to a donor, donor advisor, or related person?	30		\ <u> </u>
	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	amounts due or received from them.)	12a		†
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b			T

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.

<u>Sec</u>	tion A. Governing Body and Management		_	
			Yes	No
1a	Enter the number of voting members of the governing body			i !
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	<u> </u>		لبحج
	any other officer, director, trustee, or key employee?	2		✓
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		✓_
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		✓_
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		✓
6	Does the organization have members or stockholders?	6	\	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	\	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		\
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			1
	the year by the following:			
а		8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
•	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		1
Sec	tion B. Policies (This Section B requests information about policies not required by the Inte-			·
	enue Code.)			
			Yes	No
400	Dans the association have local chapters broughes as officiated?	10a		1
	Does the organization have local chapters, branches, or affiliates?			
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	1	
44.	form?		_	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	1	
	Does the organization have a written conflict of interest policy? If "No," go to line 13	124	_	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	40h	./	
	rise to conflicts?	12b	V	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	✓	
13	Does the organization have a written whistleblower policy?	13	✓	
14	Does the organization have a written document retention and destruction policy?	14		✓
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		
þ	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	1		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		ļ	
	with a taxable entity during the year?	16a		✓
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		L
Sec	etion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ KANSAS			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c	c)(3)s	onlv)	
	available for public inspection. Indicate how you make these available. Check all that apply.	-,,-,-	, /	
	✓ Own website ☐ Another's website ✓ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	orest	
	policy, and financial statements available to the public.	J. 1110	J. JJ.	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde o	f the	
	organization: ► Carol Ayres, 200 N 4th Street, Leavenworth, KS 66048			

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

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

- 1a Complete this table for all persons required to be listed. 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.

Check this box if the organization did not co		any o	curr			cer, d	irec			
(A) Name and Title	(B) Average	1 '-'		(D) Reportable	(E) Reportable	(F) Estimated				
Name and The	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	reportable compensation from related organizations (W-2/1099-MISC)	estimated amount of other compensation from the organization and related organizations
Bill Geiger, President	2			1				0	0	0
Mike Reilly, Vice President	2			1				0	0	0
Dinah Zeck, Secretary	2			1				0	0	0
Chris Norris, Treasurer	2			1				0	0	0
Rob Drury, Member-at-large	2			1				0	0	0
Dale Brendel	0.5	1						0	0	0
Stan Cherrie	0.5	1						0	0	0
William Cook	0.5	1						0	0	0
Marti Crow	0.5	1						0	0	0
John Denney	0.5	1						0	0	0
Karen DePriest	0.5	1						0	0	0
Mike Dreyer	0.5	1						0	0	0
Laura Janas Gasbarre	0.5	1						0	0	0
David Greenamyre	0.5	1						0	0	0
Rick Hansen	0.5	1						0	0	0
Marcy Hoppes	0.5	1						0	0	0

Part VII Section A. Officers, Directors, Tr	ustees, Key	/ Emp	loy	ees,	an	d Hig	hest	Compensate	d Employees (co	ontinuec	d)
(A)	(B)				C)			(D)	(E)		(F)
Name and title	Average hours per week	Individual trustee	nstitutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	comp fro orga and	timated nount of other pensation om the anization of related inizations
Paul Kittle	0.5	1				-		0	0		0
Carolyn Russell Klemp	0.5	1						0	0		0
Jim Mathis	0.5	1						0	0		0
Charles Meyer	0.5	1						0	0		0
June Meyer	0.5	1						0	0		0
Joan Padgett	0.5	1						0	0		0
Doug Portenier	0.5	1						0	0		0
Cindy Wentz Richter	0.5	1						0	0		0
Rod Rivard	0.5	1						0	0		0
Larry Smith	0.5	1						0	0		0
Charles Wood	0.5	,						0	0		0
		_									
1b Total		L					 	0	0	-	0
Total number of individuals (including but reportable compensation from the organization)		to the	ose	liste	ed a	bove) wh			00 in	
	-										Yes No
3 Did the organization list any former office employee on line 1a? If "Yes," complete S							oyee	e, or highest c	ompensated	3	-
4 For any individual listed on line 1a, is the sthe organization and related organizations	sum of repo	ortabl	e co	omp	ens	ation					
<i>individual</i>	or accrue		oens	 satio	on f	rom a	anv	unrelated orga		4	✓
services rendered to the organization? If "	Yes," comp	olete S	Sch	edu	le J	for s	ućh			5	✓
Complete this table for your five highest compensation from the organization.	ompensate	d inde	epe	nde	nt c	ontra	ctor	s that received	d more than \$1	00,000	of
(A) Name and business add	fress							(B)	anucos	(C)	
	Name and business address Description of services Compensation No independent contractor received more than \$100,000 of compensation.										
Total number of independent contractors (i more than \$100,000 in compensation from					to t	hose	liste	ed above) who	received		

Part	: VII	Statement of Revenue	- :				
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b d	Federated campaigns					
	g	All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	167,650	167,650			
			Business Code	10.,000			
Program Service Revenue	2a b	Horizon Kids Before and After School Child Care (Kindergarten - 5th Grade)		201,030	201,030		
e Z i	C						-
ა გ	d						
grai	f	All other program service revenue .					
<u> </u>	g	Total. Add lines 2a-2f	▶				
	3	Investment income (including dividends, other similar amounts)	▶	19,134	19,134		
	5	Royalties	proceeds				
	b	Gross Rents Less: rental expenses	(II) Personal				
	C	Rental income or (loss)					
		Net rental income or (loss)	-				
		assets other than inventory	(II) Other				
		Less: cost or other basis and sales expenses . Gain or (loss)					
		Net gain or (loss)	▶				
Revenue	8a	Gross income from fundraising events (not including \$					
Other Re	.	of contributions reported on line 1c). See Part IV, line 18 a Less: direct expenses b					
퉏		Net income or (loss) from fundraising ever	ents ▶				
	9a	Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses b					!
		Net income or (loss) from gaming activiti	es . ►			· · · · · · · · · · · · · · · · · · ·	
!	b	Gross sales of inventory, less returns and allowances a Less: cost of goods sold b					
ĺ	<u></u>	Net income or (loss) from sales of inventor Miscellaneous Revenue	y ▶ Business Code		-		
	44-		Dusiliess Code				
	וום b						
	2						
	d	All other revenue					
		Total. Add lines 11a–11d	▶				
	12	Total revenue. See instructions	. ▶	387,814	220,164		

Part IX Statement of Functional Expenses

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

	Section 501(c)(3) and 501 All other organizations must complete colu				(C), and (D).
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	92,780	92,780		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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	143,847	143,847		
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	4,110	4,110		
10	Payroll taxes	17,357	17,357		
11	Fees for services (non-employees):				
а	Management				···
b	Legal				
С	Accounting	· · · · · · · · · · · · · · · · · · ·			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	<u> </u>			
f	Investment management fees	1,669	1,669		
g	Other				
12	Advertising and promotion	563	563		
13	Office expenses	4,667		4,667	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	1,716	1,716		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings .				
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	Kansas Dept of Health Fees	320		320	
a b	Leavenworth County Fees	35		35	
C	Bank Management Fees	120		120	
d	Horizon Field Trips	9,036	9,036		
e	Horizon Supplies and Support	14,855	14,855	·	
	All other expenses	.,			·
25	Total functional expenses. Add lines 1 through 24f				
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	291,075	285,933	5,142	<u> </u>

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	76,331	1	71,549
	2	Savings and temporary cash investments	123,571	2	213,085
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
	_	Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net	-	7	
1SS	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or 10a			
		other basis. Complete Part VI of Schedule D Less: accumulated depreciation 10b		10c	
	ı			11	
	11 12	Investments—publicly traded securities		12	
	13	Investments—other securities. See Part IV, line 11	138.584		158,195
	14	· =	,	14	,
	15	Intangible assets		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	338,486		442,829
	17	Accounts payable and accrued expenses	,	17	7,604
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
ap		employees, highest compensated employees, and disqualified			
_		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	7,604
nces		Organizations that follow SFAS 117, check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
퍨	27	Unrestricted net assets		27	
Ä	28	Temporarily restricted net assets		28	
Ē	29	Permanently restricted net assets		29	
Net Assets or Fund Bala		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
əts	30	Capital stock or trust principal, or current funds		30	
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ā	32	Retained earnings, endowment, accumulated income, or other funds	338,486		435,225
ž	33	Total net assets or fund balances	338,486		435,225
	34	Total liabilities and net assets/fund balances	338,346	34	442,829

Page	1	2

Pai	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	✓	
b	Were the organization's financial statements audited by an independent accountant?	2b	✓	
С	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?	2c_	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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		
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		

Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

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.

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

OMB No 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number Leavenworth Public Schools Education Foundation 1192843 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33\% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a 🗌 Type I **b** Type II c Type III-Functionally integrated **d** ☐ Type III–Other e Dy checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (ii) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? . |11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the US? (see instructions)) support? Yes No Yes Yes

Total

	Support Schedule for Org (Complete only if you chec					and 170(b)	(1)(A)(vi)
	tion A. Public Support						
Ca	lendar 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.")	115,725	167,657	177,999	199,783	167,650	828,814
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	115,725	167,657	177,999	199,783	167,650	828,814
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.						828,814
	tion B. Total Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	115,725	167,657	177,999	199,783	167,650	828,814
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,533	23,646	0	0	19,134	49,313
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 .						878,127
12	Gross receipts from related activities, etc	•	•			12	201,030
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	re	<u> </u>	d, third, fourth,	•		ion 501(c)(3)
14	Public support percentage for 2009 (line			L column (f))	-	14	94 %
15	Public support percentage for 2009 (life Public support percentage from 2008 Sci	• • • • • • • • • • • • • • • • • • • •	-			15	96 %
16a		-	•				
104	a 33½ % support test – 2009. If the organization did not check the box on line 13, and line 14 is 33½ % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
b							
	> 33% % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33% % or more, check this box and stop here. The organization qualifies as a publicly supported organization						
17a	a 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 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test. The	stances" test, c organization qua	heck this box a difies as a public	nd stop here ly supported org	Explain in Par ganization .	t IV how the

_	till Support Schedule for Orga	nizatione Do	escribed in S	Section 500/a	1/21		Page
ı aı	(Complete only if you checke)(~)		
Sec	tion A. Public Support						
Ca	llendar 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.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$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)						
	tion B. Total Support	(-) 000F	4	(-) 0007	(4) 0000	4) 2000	T (0 T) 1
	llendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for toganization, check this box and stop I			nd, third, fourth			
Sec	tion C. Computation of Public Su	pport Perce	ntage				
15	Public support percentage for 2009 (lin					15	%
16 Sec	Public support percentage from 2008 Stion D. Computation of Investment			<u> </u>		16	%
<u>360</u> 17	Investment income percentage for 2009			d by line 13 or	olumn (A)	17	%
18	Investment income percentage from 20					18	<u>%</u>

19a 33%% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33%%, and line 17 is not more than 331/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization >

solicació A (i c	Jiiii 330 Gi 330-i	,									raye 7
Part IV	Suppleme	ntal Infor	mation. 7b; and f	Complete Part III, line	this 12.	part to pro Provide a	ovide the	explanat additiona	ions required I information.	by Part II, I See instruc	ine 10;

								•••••			
	••••••••••		•••••	•							•••••
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SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Part III

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.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization Employer identification number **Leavenworth Public Schools Education Foundation** 48 1192843 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 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 funds are the organization's property, subject to the organization's exclusive legal control? Yes No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chantable purposes and not for the benefit of the donor or donor advisor, or for any other Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Part II Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area ☐ Protection of natural habitat ☐ Preservation of a certified historic structure 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 Tax Year a Total number of conservation easements 2a 2b 2c Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► 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 easements it holds? 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 170(h)(4)(B)(i) and section 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

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.

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

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

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

the organization's accounting for conservation easements.

Page	2

	10te D (F0fff 990) 2009	A 11 .:					0: "			age Z
Par	t III Organizations Maintaini	ng Collections	of Art, Hi	storic	al Treasures,	or O	her Similar	Asset	s (contin	ued)
3	Using the organization's acquisition, collection items (check all that apply		other reco	rds, ch	eck any of the f	ollow	ing that are a	signific	cant use	of its
а	Public exhibition		d	\sqcup	Loan or exchan	ge pr	ograms			
b	Scholarly research		е		Other					
С	Preservation for future generat	ions								
4	Provide a description of the organiz Part XIV.	ation's collections	s and exp	lain ho	w they further the	he or	ganization's e	xempt	purpose	in
5	During the year, did the organization sassets to be sold to raise funds rather	than to be mainta	ained as pa	art of th	e organization's	colle	ction?	. [Yes [] No
Par	Escrow and Custodial A IV, line 9, or reported an a					swere	ed "Yes" to F	orm 9	90, Part	
	Is the organization an agent, trustee included on Form 990, Part X?					s or	other assets i	not _	Yes [] No
b	If "Yes," explain the arrangement in	Part XIV and con	nplete the	follow	ng table:		1			
								Amour	<u>it</u>	
C	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f	<u> </u>			
ь	Did the organization include an amount of "Yes," explain the arrangement in	Part XIV.				• •		. L	」Yes ∟ ———	⊔ No ———
Par	t V Endowment Funds. Co		ganizatioi	n ansv		$\overline{}$				
		(a) Current year	(b) Prio	r year	(c) Two years ba	ack ((d) Three years ba	ick (e)	Four years	back
1a	Beginning of year balance					_				
b	Contributions					_				
С	Net investment earnings, gains, and losses									
ď	Grants or scholarships									
0	Other expenditures for facilities and programs							_		
f g	Administrative expenses End of year balance									
2	Provide the estimated percentage o	f the year end ba	lance helo	as:						
а	Board designated or quasi-endowm	ent >	%							
b	Permanent endowment ▶	%								
C	Term endowment ▶ %	1								
3а	Are there endowment funds not in the organization by:	e possession of th	ne organiza	ation th	at are held and	admı	nistered for th	e _	Yes	No
	(i) unrelated organizations							<u> </u>	a(i)	
	(ii) related organizations							. <u> 3</u>	a(ii)	
_	If "Yes" to 3a(ii), are the related orga							. Li	3b	
4_	Describe in Part XIV the intended us									
Par	t VI Investments—Land, Bu	ildings, and Eq	uipment	. See	orm 990, Par	t X, li	ne 10.			
	Description of investment	(a) Cost or of (investment)			ost or other sis (other)		ocumulated preciation	(d)	Book value	a
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment									
_	Other	·								
Tota	I. Add lines 1a through 1e. (Column (d)	must equal Form 9	90, Part X,	columi	(B), line 10(c).)	<u></u>	▶			

Port VII Investments Other Securities	Soo Form 000 Bort V	line 12	Page J
Part VII Investments—Other Securities			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Financial derivatives	_		
Closely-held equity interests			
Other			
Onici			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12.)			
Part VIII Investments—Program Relate	d. See Form 990, Part X,	line 13	
(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
Kansas City Community Foundation	\$158,195	End-of-year market value	
		-	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13) ▶			
Part IX Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description		(b) Book value
	·		
	· · · ·		
T.1.01	/B) / 45)		
Total. (Column (b) must equal Form 990, Part X, col.		<u> </u>	
Part X Other Liabilities. See Form 990,			
1. (a) Description of liability	(b) Amount	_	
Federal income taxes		_	
Horizon Expenses payable to Leavenworth	7.00	_	
USD 453	7,60	4	
		_	
		\dashv	
		\dashv	
		\dashv	
		-	
		_	
		\dashv	
Total (Column (h) must equal Form 000, Dark V and (D) line 05 1		\dashv	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	1 _	<u> </u>	

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.

_	4
Page	-

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial St	atements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1			
2	Total expenses (Form 990, Part IX, column (A), line 25)	2			
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3			
4	Net unrealized gains (losses) on investments	4			
5	Donated services and use of facilities	5			
6	Investment expenses	6			
7	Prior penod adjustments	7			
8	Other (Describe in Part XIV.)	8			
9	Total adjustments (net). Add lines 4 through 8	9			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10			
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue				
1	Total revenue, gains, and other support per audited financial statements	1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	}			
a	Net unrealized gains on investments	-			
b	Donated services and use of facilities	-			
C	Thospythics of prior your grante	1			
d	Other (Describe III Fait Air.)	2e			
е	Add lines 2a through 2d	3			
3	Subtract line 2e from line 1				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	investment expenses not included on Form 950, Fait Vin, line 75	-			
b	Other (Describe in Part XIV.)	4c			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense				
1	Total expenses and losses per audited financial statements	1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities				
b	Prior year adjustments				
c	Other losses				
d	Other (Describe in Part XIV.)	T !			
	Add lines 2a through 2d	2e			
3	Subtract line 2e from line 1	3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV.)				
С	Add lines 4a and 4b	4c			
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5			
	t XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar				
	2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d ar	nd 4b. Also complete			
tnis	part to provide any additional information.				
Scl	nedule O, Part X: Leavenworth USD 453 provides payroll and accounting support for the Fou	ındation. On a month	ly		
• • • • •		• • • • • • • • • • • • • • • • • • • •			
bas	sis the Foundation provides cash to cover the anticipated monthly expenditures associated v	vith the Horizons Kids	5		
		•••••			
Pro	gram. When the books closed on June 30, 2010, the Foundation's expenditures exceeded t	he monthly cash			
advances to Leavenworth USD 453 by \$7,604. This resulted in an accounts payable to the school district. The \$7,604					
acc	ounts payable was subsequently paid in July 2010.				

Schedule D (For			Page 5
Part XIV	Supplemental	Information (continued)	
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SCHEDULE O (Form 990)

Name of the organization

Supplemental Information to Form 990

OMB No 1545-0047

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. Department of the Treasury internal Revenue Service

► Attach to Form 990.

Open to Public Inspection

Employer identification number

Leavenworth Public Schools Education Foundation	48	1192843
Form 990, Part IV, Line 11: Copies of the Form 990 and accompanying schedules were pr	ovided	to members
of the governing body.		
Form 990, Part VI, Line 19: Copies of the Leavenworth Public School Education Foundati	on gov	erning documents,
conflict of interest policy, and financial statements are available to the public upon reques	st. A.c	opy of the Form 990
	231.23.4	<u> </u>
with accompanying statements are available on the Foundation's website: www.usd453.c	rg/gen	/lpsef_generated_pages.
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