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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

Department of the Treasury Internal Revenue Service

SCANNED NOV 0 6 2010

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

Inter	nal Reve	nue Service		The organization may ha	ive to use a copy	of this return to sat	isty state repor	ting require	ments	Ореп	O Public in	spection
	For th	e 2009 calend	ar year,	or tax year beginning	7/01	, 200	9, and endir	i g 6/	30	, 2	2010	
В	Check if	applicable		С					D Employ	er Identifica	ation Number	
	Add	dress change	Please use IRS label	Panhandle Alli	ance for	Education	, Inc.		61-	141617	16	
	Na	me change	or print or type.	PO Box 1675					E Telepho	ne number		
	\vdash	tial return	See specific	Sandpoint, ID	83864				(20	8) 265	5-5959	
	H	rmination	instruc- tions.							-,		
	\vdash	nended return							G Gross r	acaints \$	964	,853.
	\vdash	<u> </u>	F Name :	Iand address of principal officer		<u> </u>		H(a) is this	a group retur			12
	L Ap	plication pending	1 Hame 6	and address of principal officer					l affiliates incl		Yes	==
	—		V 501	(-) (2) A (4047(-)(1) ***	F27	If 'No,	' attach a list	(see instruc	ctions)	
<u> </u>		exempt status				4947(a)(1) or	527					
<u>J</u>				andlealliance.					exemption no		тг	
K			X Corpora	ation Trust Associ	ation Other	<u> </u>	Year of Forma	tion ZUU	2 M	State of lega	I domicile II	<u> </u>
Pa	rt I	Summa										
				ganization's mission or								<u>n</u>
9				<u>oad-based comm</u>								
aŭ				ganization, Par								
Je T				ld and adminis							resour	ces
9		Check this box		if the organization disc			sposed of mo	ore than 2	25% of its	assets		22
≪ಶ				ibers of the governing b it voting members of th			ne 1h)			4		22
Activities & Governance				yees (Part V, line 2a)	e governing b	ouy (i ait vi, iii	16 10)			5		3
ξΞ	4		•	eers (estimate if neces	sarv)					6		300
Ac				ousiness revenue from I	-	mn (C), line 12				7a	•	0.
	0	-		taxable income from F	•	• • •				7b		0.
								-	Prior Year		Current Y	'ear
	8	Contributions :	and oran	its (Part VIII, line 1h)				<u> </u>	90,4	14.		,132.
Revenue				ue (Part VIII, line 2g)				-	30,.			7.2021
ě.				art VIII, column (A), line	es 3, 4, and 7	d)			7,0	63.	5	,685.
æ				II, column (A), lines 5,					17,2			,419.
				nes 8 through 11 (must			line 12)		114,7			,398.
	_			ounts paid (Part IX, col					381,3	51.		,631.
				members (Part IX, colu					<u>′</u>			
		-		nsation, employee bene			es 5-10)		44,8	17.	90	,731.
963			-	g fees (Part IX, column	· ·		,					<u>,</u>
Expenses				•	• • •	•	24 052	,	, 'EL &'. } ,	- T- (-)	·	, , ,
ᄶ			•	nses (Part IX, column (34,852.	·		, hr. 1		100
			-	X, column (A), lines 11		-			40,9			,027.
				nes 13-17 (must equal l			_R		467,0			,389.
	19	Revenue less	expense	s Subtract line 18 from	Iline 12		<u> </u>		-352,3	345.	12	,009.
Net Assets or Fund Balancos	ļ						טָר	Begi	nning of Y		End of Y	
100	20	Total assets (F	Part X, lı	ne 16)	130 B	1 9 2010			539,4			,420.
Ž.	21	Total liabilities	(Part X	, line 26)		~ 0 2010	(8)		9,2	216.	34	<u>,471.</u>
žŽ	22			ances Subtract line 21	from line 20.	And the second second second second			530,2	77.	543	,949.
Pa	ırtill .	Signatu	re Bloc	:k	USL							
		Under penalties	of perjury,	I declare that I have examined Declaration of preparer (other	this return, include	ng accompanying so	hedules and sta	tements, and	d to the best o	f my knowle	edge and belief,	ıt ıs
		true, correct, an	d complete	Declaration of preparer (other	than officer) is ba	sed on all information	on of which prepared	arer nas any	Knowledge /	(1)		
Sig	gn	> /					_		JUIPT.			
He	re	Signature o	f officer	1 (/1.		7		D	ate			
		▶ <i>\begin{align*}{c}</i>	red	[N, 1] an	- /	/ /	r Caj					
		Type or prin	nt name an	i (île								
				,			Date	C	Check if	Prepa (see 1	rer's identifying	number
Pa	id	l							elf- employed	(Jee)	risti detions)	
Pr	e-	Preparer's signature	► Bra	d J Williams			10/14/1		F -7	∐ _{N/A}	1	
	rer's	Firm's name (or		liams & Parsons	s, PC CPA	\$	1-0, - 1, -	- +			 .	·
Us		yours if self		Superior Street		· -		——],	ein ► N	/A		
Or	ııy	employed), address, and		dpoint, ID 8386						(208)	265-59	59
NA-	, the II	ZIP + 4		- ^		· motrications			Phone no		X Yes	
ivia	y τηe II	rs aiscuss this	s return	with the preparer showi	⊓ apove ′ (se∈	e mistructions)				1.	A TES	No

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

TEEA0113L 12/29/09

Form 990 (2009)

	n 990 (2009) Panhandle Alliance for Education, Inc.	61-1416176	Page 2
Pai	Statement of Program Service Accomplishments		
1	,		
	See Schedule 0		
	Did the organization undertake any significant program services during the year which were not liste	ed 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	n services? Yes 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 ser and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grant	vices by expenses Section 501(c	(3) (3)
	expenses, and revenue, if any, for each program service reported	is and anocations to others, the to	nai -
4 a	a (Code (Expenses \$ 200,000. including grants of \$) (Revenue \$)
	Funded an endowment fund at Inland Northwest Community Foundat		
	Panhandle Alliance for Education's ongoing endowment investmen		
	of perpetual funding in support of our operating grants. It i	s an example of our	
	long term commitment to our mission.		
			
			
		- -	
			
4 b	b (Code) (Expenses \$ 173,418. including grants of \$ 158,631	.) (Revenue Ş)
	See Schedule 0		
			-
			
40	c (Code:) (Expenses \$ 72,258. including grants of \$)
	Provided over \$72,000 to fund READY! for Kindergarten, an ear		
	program created for families with children ages birth to five		
	classes give parents the tools and information they need to pr		
	for starting school at age 5. National average indicates 44%		
	kindergarten test below "readiness proficiency" and data prove		tart_
	behind stay behind. Children who are behind their peers often		
	self-esteem and can become angry, disruptive or withdrawn. The overcome by simply having them ready for school by the time the		
	eversome by simply maying chem ready for school by the time th	ex acare wringerdarreii	·
40	d Other program services (Describe in Schedule O) See Schedule O		
	(Expenses \$ 27,659. including grants of \$ 7,000.) (Revenue	e \$)	
4e	e Total program service expenses ► 473,335.		

	·		res	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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		_x_
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? I 'Yes,' complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	• 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	,	* 1	7-1
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	, (4	ď.	
	• 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	100	, ,	,
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
12	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional Yes No			**************************************
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	DIDID DID DID THE ORGANIZATION HAVE AGGREGATE REVENUES OF 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		X
	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		X
	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		<u>X</u>
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		<u>X</u>
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	Х	
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	10		v
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	19 20		X X

Form 990 (2009) Panhandle Alliance for Education, Inc.

Pantive 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	Х	
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? <i>If 'Yes,' complete Schedule J</i>	23		Х
	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
Ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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
ļ	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		Х
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)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	Х	
ı	b 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		X
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 7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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		Х
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		Х
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		Х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 Note. All Form 990 filers are required to complete Schedule O	38	Х	
3AA		Form	990 ((2009)

Page 5

		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.		162	110
Information Returns Enter -0- if not applicable 1a 1			
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1с	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 3			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	ļ
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q	3ь		
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 Financial Accounts	,		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
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?	5c		
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		Х
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?	7a	X	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b	X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
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			s .
holdings at any time during the year?	8		
9 Sponsoring organizations maintaining donor advised funds.	<u></u>		
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?	9ь		
10 Section 501(c)(7) organizations. Enter:	25 40		•
a Initiation fees and capital contributions included on Part VIII, line 12	. *;		. 1
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11. Section 501(cVI2) organizations. Enter	4	4	
11 Section 501(c)(12) organizations. Enter a Gross income from other members or shareholders 11a	ار. ن		
]	3 3	١.
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12 Section 4047(2)(1) year experience the income from 10413	10-	٠	ļ
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	12a		L
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

BAA

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.

Section	Α.	Governing Body and Management						
							Yes	No
1 a Ente	er the	number of voting members of the governing body	Į	1 a	2:	2		
b Ente	er the	number of voting members that are independent	Į	1 b	2;	2		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? See Schedule O								
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		Х
Did the organization make any significant changes to its organizational documents								X
		prior Form 990 was filed?				_		v
		ganization become aware during the year of a material div	ersion of the organizatio	n's as	ssets?	5		X
		organization have members or stockholders?				6		
gove	erning	organization have members, stockholders, or other person body?	•			7a		X
b Are	any d	ecisions of the governing body subject to approval by men	nbers, stockholders, or of	ther p	ersons?	7 b		Х
8 Did the f	the or follow	ganization contemporaneously document the meetings heling.	ld or written actions unde	ertakei	n during the year by			
a The	gove	ning body?				8 a	Χ	
b Eacl	h com	mittee with authority to act on behalf of the governing bod	y?			8b	X	
9 Is th orga	nere a anızatı	ny officer, director or trustee, or key employee listed in Pa on's mailing address? <i>If 'Yes,' provide the names and ad</i> o	rt VII, Section A, who ca Iresses in Schedule O	nnot b	pe reached at the	9		X
		Policies (This Section B requests information	n about policies not i	requi	red by the Interna	1		
Revenue	Code)						
10 0	и					10-	Yes	No X
		organization have local chapters, branches, or affiliates?				10a		
and	brand	pes the organization have written policies and procedures hes to ensure their operations are consistent with those of	f the organization?			10b		
		ganization provided a copy of this Form 990 to all member			_	11	X	
		n Schedule O the process, if any, used by the organization) 50	ee Schedule O	10	x	
		organization have a written conflict of interest policy? If 'N	, •	that a	anuld anua rica	12a	^	
to co	onflict		•		-	12b	Х	
Sch	edule	organization regularly and consistently monitor and enforce O how this is done See Schedule 0	e compliance with the po	olicy?	If 'Yes,' describe in	12c	Х	
		organization have a written whistleblower policy?				13		X
		organization have a written document retention and destru	. ,			14	ADOM:	X જ્યાસ
15 Did to pers	the pi	ocess for determining compensation of the following perso comparability data, and contemporaneous substantiation o	ons include a review and f the deliberation and de	appro cision	oval by independent ?	200		
	_	ization's CEO, Executive Director, or top management offi	icial			15a		<u>X</u>
		ters of key employees of the organization				15b	r Maide	X .54keskel
		line 15a or 15b, describe the process in Schedule O (See	•			*		7.
		ganization invest in, contribute assets to, or participate in ng the year?	a joint venture or similar	arran	ngement with a taxable	16a	E 2. 19	X
ın jo	unt ve	as the organization adopted a written policy or procedure in nture arrangements under applicable federal tax law, and n respect to such arrangements?	requiring the organization taken steps to safeguard	to ev the o	valuate its participation organization's exempt	16b		
		Disclosures						
17 List	the s	ates with which a copy of this Form 990 is required to be t	filed > _ ID					
18 Sectionsp	tion 6 ection	04 requires an organization to make its Forms 1023 (or 1) Indicate how you make these available. Check all that appropriate the control of th	024 if applicable), 990, a oply	nd 99	0-T (501(c)(3)s only) a	avaılab	le for p	oublic
	Own	vebsite Another's website X Upor	n request					
		n Schedule O whether (and if so, how) the organization m s available to the public See Schedule O	akes its governing docur	nents,	, conflict of interest po	licy, ai	nd fina	incial
		name, physical address, and telephone number of the per				ganızat	ion:	
► <u>Bra</u>	<u>ad</u> M	illiams 708 Superior Street; Sandpoi	nt, ID83864	208	<u>-265-5959</u>			

Form 990 (2009)

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 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

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

(A)	(B)	(c) e Position (check all that apply)						(D)	(E)	(F)	
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	Reportable 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	
William Berg											
Director	1	X			ļ		<u> </u>	0.	0.	0.	
Dick Cvitanich	1 .							_	_	_	
Director	2	X					<u> </u>	0.	0.	0.	
Stacy Wasserman Temple								_	_	_	
Director	3	X	_		ļ		ļ	0.	0.	0.	
Mindy Cameron	_						ĺ	_	_	_	
Vice President	3	X		Х			ļ	0.	0.	0.	
Barbara Eacret					ł		ŀ	_	_	_	
Director	3	X			<u> </u>		ļ	0.	0.	0.	
Tom Gibson			l					_	_	_	
Director	1	X						0.	0.	0.	
Naticia Litven	1										
Director	1	X	L				ļ	0.	0.	0.	
Mel Dick]									_	
Director	1	X						0.	0.	0.	
Allison Gilmore		1					ŀ				
Director	2	X					ļ	0.	0.	0.	
Cindy Griesemer	4						ļ				
Director	2	X			L_		<u> </u>	0.	0.	0.	
Debra Heise	1										
Director	2	X			<u> </u>		<u> </u>	0.	0.	0.	
Chris Bessler							ŀ				
Director	2	X		_			<u> </u>	0.	0.	0.	
Travis Kaul	1										
Director	1	X	<u>L</u>	_				0.	0.	0.	
Annie Reeves	_										
Director	1	X						0.	0.	0.	
Vicky Pfeifer]					'					
Director	2	Х					<u> </u>	0.	0.	0.	
Don Robson]				ŀ						
Director	1	X		L				0.	0.	0.	
Roxie Lowther	_										
Director	1	X		L	<u> </u>			0.	0.	0.	
DAA		_				/10/00				Form 990 (2000)	

Part VII Section A. Officers, Directors, Trus	tees, k	(ey	En	ıplo	oye	es,	an	d Highest Con	pensated Em	ployees (cont.)
. (A)	(B)				c)			(D)	(E)	(F)
Name and Title		erage Position						Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week	or di	Inst	Officer	ě	Highest compensate employee	Former	the organization (W 2/1099 MISC)	related organizations (W-2/1099-MISC)	
		/idua	t to	ğ	Key employee	lest c	ner	(W ZI 1033 WIISC)	(11-21033-111100)	organization and related
		Į į	ᆲ		loye	gmo a				organizations
		stee	ruste		l°	l ens				
	1		ď			ed				
Canada Charle Cimpag			<u> </u>	<u> </u>	-	-	\vdash			
Georgia Shonk-Simmons Exec Committee	1	l .		•		1		0.	0	_
Brad Williams	1	X		-		\vdash		0.		. 0.
Treasurer	2	Х		Х				0.	0	. 0.
David Slaughter		Α.	l	<u> </u>		 	t^-	0.	-	· · · · · · · · · · · · · · · · · · ·
Secretary	1	X		x		1		0.	0	. 0.
Wendy Dunn	 			 ^		t	 	<u>0</u> .		<u> </u>
President	3	Х		X				0.	0	. 0.
Kathy McConnell	1							-		
Director	1	Х						0.	0	. 0.
	ļ				L	<u> </u>	<u> </u>			
	ļ									
	ļ			<u> </u>	<u> </u>	<u> </u>				
				Ì						
	ļ			<u> </u>		<u> </u>	_			
	ļ									
	ļ	_		<u> </u>		<u> </u>	-			-
	ļ					-	<u> </u>			
	i									
	 				\vdash	\vdash	\vdash			
1 b Total	1			<u> </u>	—	٠	<u> </u>	0.	0	. 0.
2 Total number of individuals (including but not limite	d to the	se li	stec	abo	ove)) wh	о ге	L:		
from the organization > 0					,	,			, ,	
										Yes No
3 Did the organization list any former officer, director	or trust	ا مو	kov	omr	alov	00	or b	ichaet companeat	ad amployee	
on line 1a? If 'Yes,' complete Schedule J for such in	ndıvıdua	al.	ксу	CITIF	эно у	cc,	01 111	ignest compensat	ed employee	3 X
4 For any individual listed on line 1a, is the sum of re the organization and related organizations greater t	portable	cor	npe	nsat	ţion	and	l oth	er compensation	from	
the organization and related organizations greater t	nan \$15	ט,טנ)U /	IT 'Y	es	com	ipiet	e Scneaule J for s	sucn	4 X
5 Did any person listed on line 1a receive or accrue of	omnone	otio	n fra	. m	2014	une	alata	od organization fo	CODUCOS	3
rendered to the organization? If 'Yes,' complete Sci	hedule .	I for	suc	h pe	ariy erso	n	eiale	.u organization 10	Services	5 X
Section B. Independent Contractors										
Complete this table for your five highest compensation from the organization	ted inde	pend	dent	cor	ntrad	ctors	s tha	it received more t	han \$100,000 of	
								T		
(A) Name and business addres	s c							(B) Description (of Services	(C) Compensation
Traine and basiness address	-							2000 i pilon		30poriodilori
	· · · · · · · · · · · · · · · · · · ·									
2 Total number of independent contractors (including		lımı	ted	to th	nose	e list	ted a	above) who receiv	ed more than	
\$100,000 in compensation from the organization	0									

Pa	t VIII Statement of Revenue				·
	•	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events. d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribus included in lns 1a-1f \$ 22,825.				
ANE	h Total. Add lines 1a-1f	808,132.			·
	Business Code	000,102.			
PROGRAM SERVICE REVENUE	2a				
ROG	f All other program service revenue g Total. Add lines 2a-2f				
<u>a</u>	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	5,685.			5,685.
	(i) Real (ii) Personal 6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss)				
	(I) Securities (II) Other				
	7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)		f , , ,		
OTHER REVENUE	8a Gross income from fundraising events (not including \$ 686,577. of contributions reported on line 1c) See Part IV, line 18 a 147,211.				
OTH	b Less. direct expenses b 371,125.	002 014	- C - day 1 1 1	· 	
_ i	c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a	-223,914.			-223,914.
	b Less: direct expenses b		3 3 3 4 7 6 7 19		
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances a 3,825. b Less: cost of goods sold b 2,330.				w
	c Net income or (loss) from sales of inventory	1,495.			1,495.
	Miscellaneous Revenue Business Code 11 a b c				
	d All other revenue				
	e Total. Add lines 11a-11d				
	12 Total revenue. See instructions	591,398.	0.	0.	-216,734.

Part IX | Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

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

Do .	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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	165,631.	165,631.	general expenses	expenses
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	103,031.	103,031.		
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,				
6	trustees, and key employees Compensation not included above, to disqualified persons (as defined under	0.	0.	_0.	0.
	section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages.	82,814.	29,380.	33,488.	19,946.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits.				
10	Payroll taxes	7,917.	2,835.	3,182.	1,900.
11	Fees for services (non-employees)				
	Management				
	Legal				
	: Accounting	4,424.		4,424.	
	Lobbying	· · · -			
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees				
	Other	440			
	Advertising and promotion	442.	0.000	0.000	442.
13	Office expenses	4,166.	2,083.	2,083.	
14	Information technology	686.		686.	
15	Royalties	0.040		0.040	
16	Occupancy	8,040.		8,040.	
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			_	
20	Interest	23.		23.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,454.		3,454.	
	Insurance	3,856.	, , ,	3,856.	
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,	e d	
	below).		· · · · · · · · · · · · · · · · · · ·		St. As
í	Programs	268,703.	268,703.		
	CHaFE Indirect Expenses	5,933.			5,933.
(Gala Indirect Expenses	5,608.			5,608.
	Board Meetings	3,953.		3,953.	
	Advertising/Awareness Campaign	3,117.	1,558.	1,559.	
1	All other expenses	10,622.	3,145.	6,454.	1,023.
25	Total functional expenses. Add lines 1 through 24f	579,389.	473,335.	71,202.	34,852.
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				
BAA			· 		Form 990 (2009)

Panhandle Alliance for Education, Inc. 61-1416176 Page 11 Part X **Balance Sheet** (A) Beginning of year **(B)** End of year 79,728 Cash - non-interest-bearing 1 28,036. 448,785 2 539,872. 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 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 3,326. 4,422. 8 8 Inventories for sale or use 9 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis 10a 15,750 Complete Part VI of Schedule D 7,654 6,089. 10b 9,661 10 c **b** Less accumulated depreciation 11 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 14 Intangible assets 15 15 Other assets See Part IV, line 11 578,420. Total assets Add lines 1 through 15 (must equal line 34) 539,493 16 16 9,216. 17 10,271 Accounts payable and accrued expenses 17 18 18 Grants payable 19 24,200. 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II 22 22 23 23 Secured mortgages and notes payable to unrelated third parties 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. 9,216. 26 34,471 **秦大王等南部公司** Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 530,177 27 543,949. 27 Unrestricted net assets 28

28 Temporarily restricted net assets

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Permanently restricted net assets

Organizations that do not follow SFAS 117, check here lines 30 through 34.

30 Capital stock or trust principal, or current funds

31 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, endowment, accumulated income, or other funds 32

Total net assets or fund balances

Total liabilities and net assets/fund balances 34

578,420. Form 990 (2009)

543,949.

100

530,277.

539,493.

29

30

31

32

33

and complete

Form 990 (2009) Pannandle Alliance for Education, Inc.	1-14161/6	Pa	ige 12
Part XI Financial Statements and Reporting			
•		Yes	No
1 Accounting method used to prepare the Form 990 X Cash $Accrual$ Other	-		
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	of the audit, 2c		
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			i i
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were consolidated basis, separate basis, or both	issued on a		
Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?	the Single		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required audit 3b		

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Form **990** (2009)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

		ndle Alliance	e for Educatio	n. Inc					61-14	116176	5		
Part				s (All organizations	must o	comple	te this	part.)					
		 		ise it is (For lines 1 thro									
1	1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i).												
2		A school described	I in section 170(b)(1)(/	A)(ii). (Attach Schedule	E)								
3		A hospital or coope	erative hospital service	e organization described	ın secti	on 1 70 (l	5)(1)(A)(iii).					
4		A medical research	n organization operate	d in conjunction with a h	ospital o	describe	d ın sec	tion 17	0(b)(1)(A)(iii) Er	nter the hos	spital's	5
		name, city, and sta	ate		. 	- 							
5		An organization op 170(b)(1)(A)(iv). (0	erated for the benefit Complete Part II)	of a college or university	y owned	or oper	ated by	a govei	rnmental	unit des	scribed in s	sectio	n
6 7	X	An organization that	at normally receives a	governmental unit descri substantial part of its si					t or from	the ger	neral public	desc	rıbed
_		1	(Complete Page 1)										
8	늗	1		170(b)(1)(A)(vi). (Comple								1.	
9	_	from activities relate investment income June 30, 1975 See	d to its exempt function and unrelated busine section 509(a)(2). (C		eptions, a section	and (2) r 511 tax)	o more to from b	than 33- usiness	1/3 % of es acqui	its suppo	ort from are:	SS	after
10	L	•	-	exclusively to test for pu									
11		more nublicly supp	orted organizations d	exclusively for the bene lescribed in section 509(zation and complete line	a)(1) or	section	509(a)(2	ictions (2) See	of, or car section	rry out th 509(a)(3	ne purpose). Check ti	s of o	ne or k that
		a Type I	b Type II		I – Fund					d	Type III-		
е	e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)												
f													
g		Since August 17, 2	2006, has the organiza	tion accepted any gift o	r contrib	ution fro	om any	of the f	ollowing	persons	;?		
												Yes	No
		(i) a person who	o directly or indirectly overning body of the si	controls, either alone or upported organization?	together	with pe	rsons d	escribe	d iu (ii) g	and (III)	11 g (i)		
			nber of a person desc								11 g (ii)		
				described in (i) or (ii) a	bove?						11 g (iii)		
h		* =	•	the supported organization									
	(i) Name of Supported Organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) tisted gove	is the ion in cot in your irning ment?	the organ	(ı) of	(vi) li organizati (i) organiz U S	on in col zed in the	(vii) Amour	nt of Sup	pport
					Yes	No	Yes	No	Yes	No			
							ļ						
					<u> </u>	<u> </u>							
					ļ	ļ	ļ <u> </u>	ļ	ļ				
Total				·					-	•			

Schedule A (Form 990 or 990-EZ) 2009

b 10%-facts-and-circumstances test — **2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

BAA

Sche	dule A (Form 990 or 990-EZ) 200					61-1416176	Page 3
Par				in Section 509	9(a)(2)		
	. (Complete only if you che	cked the box on I	ine 9 of Part I)				
	tion A. Public Support	43,0005	42 0005	1 (2007	(4) 0000	T (1) 2000	(A T-1-1
	ndar year (or fiscal yr beginning in) Gifts, grants, contributions and	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	membership fees received (Do not include 'unusual grants ')						
2	Gross receipts from admissions, merchandise sold						
	or services performed, or					1	
	facilities furnished in a activity that is related to the						
	organization's tax-exempt					1	
3	purpose 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						
5	its behalf The value of services or				 		· · · · · · · · · · · · · · · · · · ·
	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			-			
7 a	Amounts included on lines 1,						
	2, 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than						
	disqualified persons that				}		
	exceed the greater of 1% of the amount on line 13 for the						
	year						
	Add lines 7a and 7b				<u> </u>		
8	Public support (Subtract line 7c from line 6)		4 ,				
Sec	tion B. Total Support			· ·		<u> </u>	.
	ndar year (or fiscal yr beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6	(2) 2000	(2) 200	(0,200)	(4)	1 3,223	37
10 a	Gross income from interest,						
	dividends, payments received on securities loans, rents,		:				
	royalties and income form similar sources						
Ŀ	Unrelated business taxable				1	+	
	income (less section 511 taxes) from businesses						
	acquired after June 30, 1975						_
	Add lines 10a and 10b				ļ		
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		1				
	Part IV)	·,	734 , ,		الأحاطية الأساس	<u> </u>	
13 14	Total support. (add Ins 9, 10c, 11, and 12)				or fifth tay year a		8)
	organization, check this box and					3 & 30011011 301(0)(<i>"</i> ► □
	tion C. Computation of Pu						
	Public support percentage for 20		-	ne 13, column (f))).	15	<u>%</u>
	Public support percentage from tion D. Computation of Inv					16	<u></u> %
17					umn (fl)	17	%
18	Investment income percentage f	· ·		-	ullill (1))	18	
	33-1/3 support tests - 2009. If the	organization did not	check the box on	line 14, and line 15	5 is more than 33-1/3	3%, and line 17 is not	
	more than 33-1/3%, check this b	oox and stop here	. The organizatio	n qualifies as a p	oublicly supported	organization	▶
ŀ	33-1/3 support tests - 2008. If the state of	he organization d c this box and sto	id not check a bo p here. The ordai	ox on line 14 or 19 nization qualifies	9a, and line 16 is a as a publicly subt	more than 33-1/3%, orted organization	, and line 18 □
	Private foundation. If the organi						▶
BAA			TEEA0403I	. 02/15/10	Sc	chedule A (Form 99	0 or 990-EZ) 2009

Schedule A	(Form 9	90 or 990-	EZ) 2009	Panhandle	Alliance	for	Education,	Inc.	61-1416176	Page 4
Part M.	Supple	mental	Informat	tion. Complete	this part to	prov	ide the explar	nations i	61-1416176 required by Part II, formation. See inst	line 10;
	Part II,	line 17a	a or 17b;	and Part III, I	ine 12. Prov	/ide a	ny other addi	tional in	formation. See inst	ructions.
									- 	
										
										
								. 		
								. – – – -		
								-		

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

Par	nhandle Alliance for Education	. Tnc						
	manaro mirranco roi badoacron	, 110.		61-1416176				
Päi	Dorganizations Maintaining Dono	Advised Funds or Other Similar Funds	or Acco	ounts Complete	ıf			
	the organization answered 'Yes' to	o Form 990, Part IV, line 6.						
	į	(a) Donor advised funds	(b) F	unds and other acc	ounts			
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and dor funds are the organization's property, subject	nor advisors in writing that the assets held in donor to the organization's exclusive legal control?	advised	Yes	No			
6	6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit? No							
Pai	Conservation Easements Comple	ete if the organization answered 'Yes' to F	orm 99	0, Part IV, line	7			
1	Purpose(s) of conservation easements held by	the organization (check all that apply)						
	Preservation of land for public use (e g , r	ecreation or pleasure) Preservation of ar	n historica	ally important land a	area			
	Protection of natural habitat	Preservation of ce	ertified his	storic structure				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation contribution in the	form of a	a conservation ease	ment on the			
				Held at the End of	the Year			
a	Total number of conservation easements		2a					
Ŀ	Total acreage restricted by conservation easer	ments [2b					
c	Number of conservation easements on a certif	fied historic structure included in (a)	2c					
c	Number of conservation easements included in	n (c) acquired after 8/17/06	2d					
3	Number of conservation easements modified,	transferred, released, extinguished, or terminated	by the org	ganization during th	e tax			
	year •							
4	Number of states where property subject to co	onservation easement is located >						
5	Does the organization have a written policy re and enforcement of the conservation easemer	garding the periodic monitoring, inspection, handling	ng of viola	ations, Yes	□No			
6		ng, inspecting, and enforcing conservation easeme	nts	☐ 163				
7	3 3	specting, and enforcing conservation easements	\$ _		_			
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of section	n	Yes	No			
9	In Part XIV, describe how the organization reports include, if applicable, the text of the footnote to conservation easements	s conservation easements in its revenue and expense s to the organization's financial statements that desc	statement, ribes the	and balance sheet, organization's acco	and ounting for			
Par	Organizations Maintaining Colle Complete if the organization answ	ctions of Art, Historical Treasures, or Otwered 'Yes' to Form 990, Part IV, line 8.	her Sim	ilar Assets				
1 a	If the organization elected, as permitted under treasures, or other similar assets held for publi the text of the footnote to its financial statemen	SFAS 116, not to report in its revenue statement lic exhibition, education, or research in furtherance ents that describes these items	and balar of public	nce sheet works of service, provide, in	art, historical n Part XIV,			
t	 If the organization elected, as permitted under treasures, or other similar assets held for publi amounts relating to these items 	r SFAS 116, to report in its revenue statement and lic exhibition, education, or research in furtherance	balance : of public	sheet works of art, service, provide th	historical e following			
	(i) Revenues included in Form 990, Part VIII,	line 1		> \$				
	(ii) Assets included in Form 990, Part X			► \$				
2	If the organization received or held works of a amounts required to be reported under SFAS	rt, historical treasures, or other similar assets for fi 116 relating to these items	inancial g	ain, provide the fol	lowing			
a	Revenues included in Form 990, Part VIII, line	1		► \$				
t	Assets included in Form 990, Part X			► \$				

Schedule D (Form 990) 2009 Panha					61-141			
Part III Organizations Mainta	ining Collection	s of Art, Histo	orical T	reasures, or	Other Similar Ass	ets (continued)		
3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply)								
a Public exhibition		d Loan	or exchar	nge programs				
b Scholarly research		e Other						
c Preservation for future gener								
Part XIV								
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No								
Part IV Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.								
1 a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? X Yes No								
b If 'Yes,' explain the arrangement	in Part XIV and cor	nplete the follow	ıng table			 		
See Part XIV					 	Amount 1 454 026		
c Beginning balance					1c	1,454,026.		
d Additions during the year					1 d	381,650.		
e Distributions during the year					1 e	63,334.		
f Ending balance	mount on Form 000	Dort V. Ivaa 212	,		[[[[]]	Yes X No		
2a Did the organization include an a b If 'Yes,' explain the arrangement		, Fart A, line 21	•		L	res		
Part V Endowment Funds Co		ation answer	ed 'Yes	' to Form 990) Part IV line 10			
Tart V Elidowillent I didd 00	(a) Current year	(b) Prior yea		c) Two years back	(d) Three years back	(e) Four years back		
1 a Beginning of year balance	(a) current year	(3) 11101 300	· · · · · ·	oy The years back	(a) Three years back	(o) i our youro buon		
b Contributions								
c Net Investment earnings, gains, and losses						I.		
d Grants or scholarships		· -		· · · · · ·				
Other expenditures for facilities and programs					, 4			
f Administrative expenses				. ,	* .			
g End of year balance			5					
2 Provide the estimated percentag	e of the year end ba	lance held as		•				
a Board designated or quasi-endov	vment ►	%						
b Permanent endowment ▶								
c Term endowment ►	8							
3a Are there endowment funds not organization by	in the possession of	the organization	that are	held and admin	stered for the	Yes No		
(i) unrelated organizations						3a(i)		
(ii) related organizations						3a(ii)		
b If 'Yes' to 3a(II), are the related of	organizations listed a	as required on S	chedule F	!?		3b		
4 Describe in Part XIV the intender	d uses of the organiz	zation's endowm	ent funds					
Part VI Investments-Land, B	uildings, and Ed	uipment. See	e Form	990, Part X,	line 10.			
Description of investment		st or other basis nvestment)	(b) Co basi	st or other s (other)	(c) Accumulated Depreciation	(d) Book Value		
1 a Land					1 1 1 ~			
b Buildings								
c Leasehold improvements			· · · · · · · · · · · · · · · · · · ·					
d Equipment				15,750.	9,661.	6,089.		
e Other								
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	rm 990, Part X, o	column (E	3), line 10(c)).	<u> </u>	6,089.		
BAA					Sched	ule D (Form 990) 2009		

Part VII	Investments-Other Securities See Fo	orm 990, Part X, line	e 12. N/A	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valua	tion
			Cost or end-of-year mark	ket value
Financial of		-		· · · · · · · · · · · · · · · · · · ·
=	ld equity interests			
Other				
			· · · · · · · · · · · · · · · · · · ·	
				
	_ 			
		 		
				
- 				··················
	mn (b) must equal Form 990 Part X, col (B) line 12)	<u> </u>	12)	
Part VIII	Investments—Program Related (See			
	(a) Description of investment type	(b) Book value	(c) Method of valuate Cost or end-of-year mark	tion cet value
			Cost of end-of-year mair	tet value
-		h		
		 		
		 		
	")			
Part IX	nn (b) must equal Form 990, Part X, Col (B) line 13) Other Assets (See Form 990, Part X,	line 15) N/A		
raitin	· · · · · · · · · · · · · · · · · · ·	escription		(b) Book value
	(a) De	scription		(b) book value
-				
				
				
T-A-I (C	diversión de la constantidad de	15\	-	
Part X	Olumn (b) must equal Form 990, Part X, col (B), I Other Liabilities (See Form 990, Part			
raitA	· · · · · · · · · · · · · · · · · · ·			
Carlanal In	(a) Description of Liability	(b) Amount	- 	
rederal in	come Taxes		─ '	
			- `	
			 	
			\dashv	,
			\dashv	
			- 	
			- 	
			- 	
			-	
			\dashv	
	mn (b) must equal Form 990, Part X, col (B) line 25)			
2. FIN 48 for uncerta	Footnote In Part XIV, provide the text of the foo ain tax positions under FIN 48	tnote to the organization	's financial statements that reports the	organization's liability

Schedule D (Form 990) 2009 Panhandle Alliance for Education, Inc.

61-1416176

Page 3

Sche	dule D (Form 990) 2009 Panhandle Alliance for Education, Inc. 61-14	116176 Page 4
Par		N/A
1	Total revenue (Form 990, Part VIII,column (A), line 12)	
2	Total expenses (Form 990, Part IX, column (A), line 25)	
3	Excess or (deficit) for the year Subtract line 2 from line 1	
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	
	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return	n N/A
1	Total revenue, gains, and other support per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments 2a	
b	Donated services and use of facilities 2b	
c	Recoveries of prior year grants 2c	
d	Other (Describe in Part XIV)	
е	Add lines 2a through 2d 20	е
3	Subtract line 2e from line 1	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investments expenses not included on Form 990, Part VIII, line 7b. 4a	
b	Other (Describe in Part XIV)	_
c	Add lines 4a and 4b	С
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	
Par	t XIII/ Reconciliation of Expenses per Audited Financial Statements With Expenses per Ret	urn N/A
	Total expenses and losses per audited financial statements	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	
а	Donated services and use of facilities 2a	
b	Prior year adjustments 2b	
C	Other losses 2c	
d	Other (Describe in Part XIV)	<u>s</u>
е	Add lines 2a through 2d	
_	Subtract line 2e from line 1	
	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	å L
	Other (Describe in Part XIV)	-
	Add lines 4a and 4b	
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18) 5	<u> </u>
, Ran	Supplemental Information	
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line 1, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b Also complete this part to mation.	s 1b and 2b, Part V, provide any additional
	Part IV, Line 1b - Contributions Or Other Assets Not Included on B/S	
	Panhandle Alliance for Education contributes funds to accounts maintaine	ed by two
	large regional community foundations (Idaho Community Foundation and In	land Northwest
	Foundation). Those funds, once contributed, are owned by the community	foundations.
	Panhandle Alliance for Education has a right to receive annual income de	istributions.
	Those annual income distributions are intended to fund grant-making open	rations in
	perpetuity.	

Schedule D (Form 990)	2009 Panhandle	Alliance for	Education, In	c.	61-1416176	Page 5
Schedule D (Form 990) Part XIV Supplen	nental Information	(continued)			·	
•						
			·			
						
				· 		
						
						
			_			
					-	
					-	
						
						

SCHEDULE.G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form990 or Form 990-EZ. ► See separate instructions.

OMB No 1545 0047

2009

Open to Public Inspection

me of the organization Employer identification number									
anhandle Alliance for Education, Inc. 61-1416176									
Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17 Part I Form 990EZ filers are not required to complete this part									
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply									
X Mail solicitations				X Solicitation of non-					
X Internet and email solicitations	9			Solicitation of gove					
X Phone solicitations	3			X Special fundraising		grants			
				A special fulluraising	events				
X In-person solicitations 2a Did the organization have written	or oral agraeme	ant with an	w individu	al (including officers d	roctors	trustage or kay	-		
employees listed in Form 990, Par	rt VII) or entity	in connect	tion with p	rofessional fundraising	services	irusiees or key	Yes X	No	
b If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	b If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization								
	Ι				(v) An	nount paid to			
(i) Name of Individual	(ii) Activity		fundraiser	(iv) Gross receipts	or r	retained by)	(vi) Amount paid	to	
or entity (fundraiser)			dy or control ibutions?	from activity	Tunara	aiser listed in col (i)	(or retained by	organization	
		 	1			33. (1)	organization		
		Yes	No						
		<u> </u>	ļ						
			ļ						
			:						
Total			7			·		^	
Total 3 List all states in which the organiz	ation is register	ed or lice	nsed to so	licit funds or has been	notified	It is exempt fro	m registration	0.	
or licensing	ation is register	ca or neer	1300 10 30	ment runus or mus been	nomica	it is exempt no	in registration		
ID									
	 -								

_		G (Form 990 or 990-EZ) 2009 Panhand Fundraising Events . Complete if reported more than \$15,000 on F	the organization ai	nswered 'Yes' to Fo	rm 990, Part IV, II	ne 18. or	
RE	•	reported more than \$15,000 on r	(a) Event #1 Golf Tournamen (event type)	(b) Event #2 Summer Gala (event type)	(c) Other Events 1 (lotal number)	(d) Total Events (Add col (a) through col (c))	
REVEXUE	1	Gross receipts	642,932.	113,631.	76,562.	833,125.	
Ē	2	Less Charitable contributions	558,832.	77,346.	50,399.	686,577.	
_	3	Gross income (line 1 minus line 2)	84,100.	36,285.	26,163.	146,548.	
	4	Cash prizes		1,750.		1,750.	
D	5	Noncash prizes	1,399.			1,399.	
D I R E C T	6	Rent/facility costs	271,605.	9,758.	1,495.	282,858.	
	7	Food and beverages	4,554.	16,465.	5,741.	26,760.	
X	8	Entertainment	300.	650.		950.	
EXPESSES	9	Other direct expenses	1,756.	24,065.	31,298.	57,119.	
	10 11 t III	Direct expense summary Add lines 4- th Net income summary Combine lines 3, of Gaming. Complete if the organize \$15,000 on Form 990-EZ, line 6a	column (d) and line 10 ation answered 'Ye	s' to Form 990, Par	t IV, line 19, or rep	370,836. -224,288. ported more than	
WCZM<		, , , , , , , , , , , , , , , , , , , ,	(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))	
E	1 Gross revenue						
D-RECT	2	Cash prizes					
E S C E	3	Non-cash prizes					
S	4	Rent/facility costs					
	5	Other direct expenses	Yes %	Yes %	Yes %		
	6	Volunteer labor	No	No No	No		
	7	Direct expense summary Add lines 2 thr	ough 5 in column (d)		•		
	8	Net gaming income summary Combine I	ines 1, column (d) and	line 7	•	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10 a	9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?						
11	 Doe	s the organization operate gaming activities	es with nonmembers?			<u> </u>	
12	ls th	ne organization a grantor, beneficiary or tri ninister charitable gaming?		ember of a partnership of	or other entity formed to	12	

Schedule G (Form 990 or 990-EZ) 2009 Panhandle Alliance for Education,	Inc. 61-141617	6	Р	age 3
•			YES	NO
13 Indicate the percentage of gaming activity operated in				1
a The organization's facility	13a %	[
b An outside facility	13b %			'
14 Enter the name and address of the person who prepares the organization's gaming/specia	al events books and records:			
				:
Name				
Address -				,
			_	
15a Does the organization have a contact with a third party from whom the organization receiv	es gaming revenue?	15a		
b If 'Yes,' enter the amount of gaming revenue received by the organization \$	and the amount			i
of gaming revenue retained by the third party \$				1
c If 'Yes,' enter name and address of the third party				
Name •				
		}		
Address •				i
				!
16 Gaming manager information				1
Name •				i
Gaming manager compensation \$				
Description of services provided			i	
	I		i	į
Director/officer Employee Independent contract	tor		,	1
17 Mandatani distributione				
17 Mandatory distributions				
a Is the organization required under state law to make charitable distributions from the gami state gaming license?	ing proceeds to retain the	17a		1
		-		
b Enter the amount of distributions required under state law to be distributed to other exemp	organizations or spent in the		.	
organization's own exempt activities during the tax year > \$	Schedule G (Form 990	00	0 E 7	2000
BAA TEEA3703L 02/05/10	Schedule G (Form 990	or 99	v-⊏Z)	2009

SCHEDULE I

Parill General Information on Grants and Assistance Panhandle Alliance for Education, Inc.

Department of the Treasury Internal Revenue Service Name of the organization

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

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

SUUC

OMB No 1545-0047

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	12.
	P7.

Employer Identification number

61-1416176

1 Does the organization maintain records to substantiate the amount of the selection criteria used to award the grants or assistance?	ds to substantiate the he grants or assistand	amount of the gra	the grants or assistance, the grantees' eligibility for the grants or assistance, and	rantees' eligibility for th	ne grants or assistanc		X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	s procedures for moni	toring the use of gr	ant funds in the United	States See Par	rt IV		
Partil Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form	nce to Governme	ints and Organi	zations in the Unite	ed States. Complet	e if the organizat	ion answered 'Ye	s' to Form
990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	ry recipient that re Form 990) if addi	eceived more th tional space is i	ian \$5,000. Check t needed	his box if no one r	ecipient received	more than \$5,00	o. Use ▼
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
						Funded projects for	
nd Oreille School Dist						educators/educa	
901 Triangle Drive Ponderay, ID 83852	82-0508739		.158,631.	0		tional enrichment	
							Art and
Pend Oreille Arts Council	i						Education Outreach
Sandboint, ID 83864	82-0350688		7,000.	.0			Programs
2 Enter total number of section 501(c)(3) and government organizations3 Enter total number of other organizations	(3) and government on tions	rganızatıons				A A	1

Schedule I (Form 990) 2009

TEEA3901L 02/10/10

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

Page 2 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. (f) Description of non-cash assistance Radii Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 61-1416176 (e) Method of valuation (book, FMV, appraisal, other) ___Each grantee is required to submit payment requests detailing the amount requested and how it will be spent to full-fill the grant. Ledgers are kept relating to the (d) Amount of non-cash assistance (c) Amount of cash grant Part I, Line 2 - Grantmaker's Description of How Grants are Used Panhandle Alliance for Education, __original grant awarded and the amounts spent.__ 28 (b) Number of recipients (a) Type of grant or assistance Schedule 1 (Form 990) 2009 Education Enrichment [Perf] [[[

BAA

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

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number Panhandle Alliance for Education, Inc. 61-1416176 Part I 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? (a) Name of disqualified person (b) Description of transaction 1 No Yes Enter the amount of tax imposed on the organization managers or disqualified persons during the year under Ś section 4958 ▶ \$ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization 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. (g) Written agreement? (c) Original incipal amount (f) Approved by board or committee? (b) Loan to or from the organization? (d) Balance due (e) In default (a) Name of interested person and purpose Τo From Yes No Yes No \$ Total **Grants or Assistance Benefitting Interested Persons.** Part III Complete if the organization answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (a) Name of interested person (c) Amount and type of assistance Part IV Business Transactions Involving Interested Persons Complete if the organization answered'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of transaction \$ (d) Description of transaction (e) Sharing of organization's revenues? No 3,299 Advertising, web design Х Director Chris Bessler Bank Accounts Х Travis Kaul Director Х Tom Gibson Director Money Market Account

Mindy Cameron BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990

Treasurer

Director

Vice-President

Schedule L (Form 990 or 990-EZ) 2009

Accounting/Tax Services

LPOSD Board of Trustee

Food/drink purchases

X

Х

X

Brad Williams

Mel Dick

4,424

6,583.

SCHEDULE L (Form 990 or 990-EZ)

Transactions with Interested Persons

OMB No 1545-0047 2009

Open to Public

Schedule L (Form 990 or 990-EZ) 2009

Department of the Treasury Internal Revenue Service

or 990-EZ.

► 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.

Inspection

Name of the organization						Emp	oloyer ic	dentifica	ation nu	mber		
Panhandle Alliance for Educa	tion,	Inc.				61	-141	1617	6			
Part I Excess Benefit Transactio Complete if the organization answ	ns (sect	ion 50	1 (c)(3) a n 990, Par	and section t IV, line 25a c	501(c)(or 25b, or	4) organiza Form 990-EZ,	tions Part V	only , line	/). 40b.			
			(In December of Institute								(c) Correcte	
1 (a) Name of disqualified person			(b) Description of transact			on of transaction	1 			Yes	No	
					<u> </u>							
2 Enter the amount of tax imposed on the section 49583 Enter the amount of tax, if any, on line	2, above,	reimburs	sed by the			ring the year	under	► \$ ► \$				
Part II Loans to and/or From Inter Complete if the organization answ				t IV, line 26 or	Form 990)-EZ, Part V, lı	ne 38a	1.				
(a) Name of interested person and purpose	(b) Loan the orga	to or from	(c) princi	Original pal amount	(d) B	alance due	(e) In d	lefault?	(f) App by bo comm	oroved ard or oittee?	(g) W agree	/ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
										ļ		L
Total Part III. Grants or Assistance Bene Complete if the organizatio	efitting I	nterestered 'Yo	ted Pers	<u>► \$</u> sons. orm 990, P	art IV, I							,
(a) Name of interested person	(b) Relation:	ship between the organ	interested person	and	(c)	Amoun	t and ty	pe of as	sistanci	•	-
	+											
	<u> </u>											
Part IV Business Transactions Inv Complete if the organization	olving l n answe	nteres red'Ye	ted Pers	s <mark>ons.</mark> orm 990, Pa	art IV, lı	ne 28a, 28t	o, or	28c.				
(a) Name of interested person		elationship sted persor organizatii	n and the	(c) Amour transaction	nt of on \$	(d) Desc	cription o	of transa	ection		(e) Sha organiz rever	aring of zation's nues?
Dick Cuitanich	Diror					I DOCD Com	rint	ando-	<u> </u>		Yes	No
Dick Cvitanich	Direc					LPOSD Supe				<u> </u>		X
Vickie Pfeifer Tom Gibson	Direc Direc			 	17,884.	Tom's wife						X
TOM GIDSON	PILEC				17,004.	TOW 2 WITE	12 0	и еш	ρτογι			
				- · · · · · · · ·			<u>.</u>					

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SCHEDULE M (Form 990) ·

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

OMB No 1545-0047

2009

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Panhandle Alliance for Education, Inc.

Employer identification number

61-1416176

Pai	t I Types of Property						
		(a)	(b)	(c)		(d)	
		Check if applicable	Number of Contributions	Revenues reported on Form 990,	Metho	d of determir revenues	ning
				Part VIII, line 1g			
1	Art—Works of art	х	1	5,000.	FMV		
2	Art-Historical treasures	^		3,000.	1111	· ·	
3	Art–Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes				-		
8	Intellectual property						
9	Securities—Publicly traded						
10	Securities—Closely held stock						
11	Securities-Partnership, LLC, or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation contribution—						
14	Qualified conservation contribution—Other						
15	Real estate—Residential						
16	Real estate—Commercial						
17	Real estate-Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► ()						
26	Other ► ()						
27	Other ► ()						
28	Other ► (į				
29	Number of Forms 8283 received by the organization	n during the	tax year for contributi	ons for which the	_		
	organization completed Form 8283, Part IV, Dones	e Acknowled	gement		29		
					Г	Yes	No
30 a	During the year, did the organization receive by co	ntribution ar	ny property reported in	Part I. lines 1-28 that	ıt must		
	During the year, did the organization receive by co- hold for at least three years from the date of the in purposes for the entire holding period?	nitial contribu	ition, and which is not	required to be used fo	r exempt -	30 a	X
	If 'Yes,' describe the arrangement in Part II						لــــــــــــــــــــــــــــــــــــــ
31	Does the organization have a gift acceptance police	y that requir	es the review of any n	on-standard contribution	ons?	31	<u>X</u>
32 a	Does the organization hire or use third parties or r noncash contributions?	elated organ	izations to solicit, proc	cess, or sell		32a	X
b	If 'Yes,' describe in Part II						

describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

Schedule	M (Form 990) 2009	Panhandle	Alliance	for	Education,	Inc.	61-1416176	Page 2
Part II	Supplemental II and 33. Also co	nformation. Complete this pa	Complete this art for any ac	part dditio	to provide the nal information	information red	quired by Part I, lines 30b	, 32b,
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
Panhandle Alliance for Education, Inc.	61-1416176
Form 990, Part III, Line 1 - Organization Mission	
To promote excellence in education and provide broad-based comm	unity support for
local public schools. As an independent organization, Panhandl	<u>e Alliance for</u>
Education will fund an endowment with assets held and administe	red by a community
foundation, to provide resources in support of effective teachi	ng, learning and
school_management	
Form 990, Part III, Line 4b - Program Service Accomplishments	
Distributed over \$89,000 for classroom grants to schools in our	region_in_2009/2010
for projects that provide educational enrichment. Teachers comp	ete on an annual
basis and awards are given based on a variety of criteria inclu	ding innovation.
Paid \$28,000 to Lake Pend Oreille School District for a Career	Guidance Counselor
and Information Center. Counseling is offered to students on o	areer planning, the
college/technical school application process, financial aid, and	d scholarships.
Results indicate students are highly motivated to pursue post s	econdary education in
both universities and technical schools.	
Contributed \$41,233 to Lake Pend Oreille School District for a	reading_program_for
every teacher in the district. Measurable results identify imp	rovement in reading,
writing, and Language Arts test scores and overall student achi	evement_at_all_grade
levels K-12.	
Form 990, Part III, Line 4d - Other Program Services Description	
After school tutoring	
2nds Anyone Marketing	

Schedule O (Form 990) 2009		raye z
Name of the organization Panhandle Alliance for Education, Inc.	Employer identification number 61-1416176	
Form 990, Part III, Line 4d - Other Program Services Description (continued)		
POAC: Ovations Performing Arts and Kaleidoscope Vusual Arts Pr	ograms	
Tone. Ovacions reflorming files and Ratefuescope vasual files in	0914113	
Substitute teacher training		
College Fair & PTE tour		
		
		-
		
		
	-	
Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directo	rs, Etc.	
William Berg and Mindy Cameron, a married couple, are both dir	ectors.	
Tom Gibson and Tracy Gibson, a married couple - Tom is a direc	tor and Tracy is a	
paid employee.		
Form 990, Part VI, Line 11 - Form 990 Review Process		
A draft copy of the tax return is presented to the executive c	ommittee for approv	/al.
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Co	nflicts	
The executive committee reviews conflict of interest forms at	an annual meeting.	

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer identification number
Panhandle Alliance for Education, Inc.	61-1416176
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Governing documents, policies, financial and tax reports are a	available to the public
doverning documents, porticles, rinancial and tax reports are a	ivaliable to the public
upon request.	
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009	Federal Supporting Detail		Page
-	Panhandle Alliance for Education, Inc.		61-141617
Supplemental Financial (Sched Additions during the year	lule D)		
Additions of Cash Unrecognized Gain/Loss		\$ Total \$	200,000. 181,650. 381,650.