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Form **990-EZ**

Department of the Treasury Internal Revenue Service

OMB No 1545-1150

Open to Public Inspection

Short Form
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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form

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

A	Fo	or the	e 2009 calendar year, or tax year beginning JUL 1, 2009	and end	ding JUN	30,	2010
В	Che	eck if	C Name of organization				identification number
	\neg	Address change	use IRS				
Ì		Name change	print or THE CHEYENNE SCHOOLS FOUNDATION			83-0	313084
ì	37	Initial return	Number and street (or P O. box, if mail is not delivered to street address)		Room/suite E	Telephone	
ì		Termir	Specific 2810 HOUSE AVENUE			•	632-8971
i		ated Ameni	Illistruc-			Group Exe	
i		return Applicat pending				Number	· ·
_!			ion 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a	completed	G Accounting		
		0000	Schedule A (Form 990 or 990-EZ)	completed	Other (spe		7.00.00.
ī	W	heite	× N/A				the organization is not
,			empt status (check only one) $-\mathbb{X}$ 501(c) (3) \blacktriangleleft (insert no.) \square 4947(a)(1)	or 52	l l		fule B (Form 990, 990-EZ, or 990-PF)
K	•	eck D					
	OII	COK P	Form 990 return is not required, but if the organization chooses to file a return, l	-	-		20,000. AT 01111 330 EZ 01
ī	Δd	d line	s 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990		•	S	48,482.
Ē	Par		Revenue, Expenses, and Changes in Net Assets or Fund I				
Ŀ	Ť		Contributions, gifts, grants, and similar amounts received			1	,
			Program service revenue including government fees and contracts			2	
<u>رست</u> رست			Membership dues and assessments			3	
2011			Investment income			4	1.
ക			l e e e e e e e e e e e e e e e e e e e	5a		7	
e			· · · · · · · · · · · · · · · · · · ·	5b		-	
EB			Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	30]	·	→ 5c	
	,		Special events and activities (complete applicable parts of Schedule G). If any amount is f	from semina s	shook boro	7 30	
7	2		Gross revenue (not including \$ of contributions	nom yanınıy, c	SHECK HEIE	-	
	5			ام	10 101	.	
SCANNED F	•		· · · · · · · · · · · · · · · · · · ·	6a 6b	48,481 13,799		
			Less: direct expenses other than fundraising expenses Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	ן עס	13,133		24 602
Ü				₇₀		6c	34,682.
M			-	7a 7b			
				10		- ,	
			Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) Other revenue (describe ▶			7c	
) 8	24 602
-	١,		Total revenue Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 Grants and similar amounts paid (attach schedule) S	TMT 1		9	34,683. 39,263.
			,	1111 1		10	39,203.
			Benefits paid to or for members			11	
ğ	; ;	12	Salaries, other compensation, and employee benefits Professional fees and other payments to independent conference in the conference in t	_		12	6,500.
7 7 8 8 8		13	Occupancy, rent, utilities, and maintenance			13 14	0,300.
Ĭ	<u> </u>		T I 11 11 11 11 11 11 11 11 11 11 11 11 1			15	56.
			1071) 16	30•
			Other expenses (describe Total expenses Add lines 10 through 16	·) 10 17	45 910
_			Excess or (deficit) for the year (Subtract line 17 from line 9) COENT LINE	····		18	45,819. -11,136.
Ų	3		Net assets or fund balances at beginning of year (from line 27, column (A))			10	-11,130.
9	; '		(must agree with end-of-year figure reported on prior year's return)			10	47,049.
Not Accete			Other changes in net assets or fund balances (attach explanation)			19	47,043.
Ž			Net assets or fund balances at end of year. Combine lines 18 through 20			20	35,913.
Г	Par		Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more	file Form 000	unctood of Form	<u>▶ 21</u>	33,913.
L	r ai	· "	(See the instructions for Part II.)		Beginning of ye		(B) End of year
	22	Cack	·	(^)			
	22 23		n, savings, and investments I and buildings		47,04		36,370.
	23 24		r assets (describe	,		23	
	24 25		l assets	— ' 	47,04		26 270
	25 26		l liabilities (describe ► ACCOUNTS PAYABLE	\	47,04	0.26	36,370.
	20 27		assets or fund balances (line 27 of column (B) must agree with line 21)	— ' 	47,04		<u>457.</u> 35,913.
	3217 2-08-	<u> </u>	LHA For Privacy Act and Paperwork Reduction Act Notice, see the separate instruc		41,04	20 . 21	Form 990-EZ (2009)
C	2-08-	· TU		vuuna.			101111 220-LE (2009)

	m 990-ZZ (2009) THE CHEYENNE SCHOOLS FOUN	DATION		83-	031	3084 Page 2
_	art III Statement of Program Service Accomplishmen		Part III)		ļ	Expenses
	at is the organization's primary exempt purpose? SEE STATEMENT					ed for section 501(c)(3) I(c)(4) organizations and
	scribe what was achieved in carrying out the organization's exempt pur services provided, the number of persons benefited, and other relevan			ibe	section for other	4947(a)(1) trusts, optional
28	SEE STATEMENT 4	, and the second pro-			1	-
	(Grants \$ 39, 263.) If this amount includes foreign g	rants, check here			28a	39,263.
29						
	(Cranto C	wasta abaal bara		$\overline{}$	000	
30	(Grants \$) If this amount includes foreign g	rants, check here		لــــا	29a	
50		-	· ··· • • • • • • • • • • • • • • • • •		·	
	(Grants \$) If this amount includes foreign g	rants, check here	>		30a	
31	Other program services (attach schedule)					
	(Grants \$) If this amount includes foreign g	rants, check here	<u>></u>		31a	
32	Total program service expenses (add lines 28a through 31a)				32	<u>39,263.</u>
P	art IV List of Officers, Directors, Trustees, and Key E	mployees. List each one ev	ven if not compensated			
		(b) Title and average hours	(c) Compensation		ontributio employee	
	(a) Name and address	per week devoted to	(If not paid, enter	bene	fit plans	& account and
		position	-0-)	ı	eferred pensatio	other allowances
	SEE STATEMENT 3					
_						
				-		
		····				
777						
932 02-0	172 8-10				For	rm 990-EZ (2009)

33 Did the organization engage in any activity not previously reported to the IRS2 "I "Yes," attach a detailed description of each activity. Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes If the organization had microme from business activities, such as those reported on line 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization and not report the income on Form 990-T. If the organization had microme from business activities, such as those reported on line 2, 6a, and 7a (among others), but not reported on Form 990-T. The such activities is a business of the organization and proxy tax requirements? If the organization undergo a liquidation, dissopulion, termination, or significant disposition of net assets during the year? If Yes, complete applicable parts of Sch. N. If the organization of pollural expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file Form 1120-PDL for this year? If the organization file organization file organization file in the instructions. If the organization file organization file organization file instructions for the organization file organization engage in any section 4958 excess benefit transaction during the year under section 4911 (yes) organization. File organization engage in any section 4958 excess benefit transaction		Other information (Note the statement requirements in the instructions for Part V)		Yes	No
34 Were any changes made to the organizand or governing documents? If "Yes," attach a conformed copy of the changes of the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on form 990-T, tatch a statement explaining why the organization did not report the income on Form 990-T and the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization undergo a legislation of the properties of the organization of properties of the organization of the organization feet of the period covered by this return? 37b	33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	1.00	X
35 If the organization that income from business activates, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization of not report the income on Form 990-T or 190-T attach as statement explaining why the organization of not report the income on Form 990-T or 190-T	34	·		<u> </u>	X
reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T and Did the organization have unrelated business gross mocione of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy fax requirements? 358	35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not		l	
and proxy tax requirements? If "Yes," has it filed a tax return on Form 990-T for this year?					Ì
and proxy tax requirements? If "Yes," has it filed a tax return on Form 990-T for this year?	а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting,			ŀ
b If Yes,* has if field a fax return on Form 990-T for this year? Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If Yes,* complete applicable parts of Sch. N 37a		· · · · · · · · · · · · · · · · · · ·	35a		х
36 Did the organization undergo a liquidation, dissolution, terrimation, or significant disposition of net assets during the year? If Yes,* complete applicable parts of Sch. N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37 a O. ↑ b Did the organization the Form 1120-POL for this year? 38 b If Yes, complete applicable part of Norm, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? ■ 17	b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b	N/	1
ocomplete applicable parts of Sch. N 37a	36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes,"			
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-POL for this year? 37b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? If Yes,* complete Schedule L, Part II and enter the total amount involved Section 501(c)(7) organizations. Enter: a Indiation fees and capital contributions included on line 9 6 Gross receips, included on line 9, for public use of club facilities 38b N/A 39 Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. Section 501(c)(3) organizations. Did the organization engage in any section 4958 texes benefit transaction during the year or is it 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 organizations propriet and supposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c rembursed by t			36		Х
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b If "Yes," complete Schedule L, Part II and enter the total amount involved 38	38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made			
b If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations. Enter: a Inhation fees and caphal contributions included on line 9 b Gross receipts, included on line 9, for public use of club facilities b Gross receipts, included on line 9, for public use of club facilities cection 4911 ► 0.; section 4955 ► 0. b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► 0.; section 4915 ► 0.; section 4955 ► 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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-E27 if "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the earn and the section 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the earn and the section 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete form 8886-T List the states with which a copy of this return is filed. ► NONE The organizations. At any time during the tax year, was the organization and party to a prohibited tax shelter transaction? If "Yes," enter the name of the foreign country. ► Alany time during the calendar year, did the organization manatian any office outside of the U			38a	·	X
39 Section 501(c)(7) organizations. Enter: a initiation fees and capital contributions included on line 9 b Gross recepts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0. ; section 4915 ▶ 0. b Section 501(c)(4) organizations. Did the organization engage in any section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 495 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 495 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8886-T 11. Let the states with which a copy of this return is filled. ▶ NONE 12. The organization or shocks are in care of ▶ BRUCE HENNING 13. Telephone no. ▶ 307-632-8971 14. Let the states with which a copy of this return is filled. ▶ NONE 14. 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. ▶ 14. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts 14. At any time during the calendar year, did the organization maintain an office outside of the U.S.? 14. Yes,* enter the name of the foreign country: ▶ 14. Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of F	b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
b Gross receipts, included on line 9, for public use of club facilities 40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4915 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4956 excess benefit transaction during the year or is it 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 organizations. Prior Forms 990 or 990-EZP if "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete form 8866-T Located at ▶ 2810 HOUSE AVENUE, CHEYENNE, WY TIP+4 ▶ 82001 b 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 accounts? 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 of Al any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country. ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year Did the organization maintain any donor advised funds	39	Section 501(c)(7) organizations. Enter:	1		
Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under; section 4911 ▶ 0 . ; section 4912 ▶ 0 . ; section 4955 ▶ 0 . b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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-E27 If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T List the states with which a copy of this return is filed. ▶ NONE 1 the organization's books are in care of ▶ BRUCE HENNING Telephone no. ▶ 307-632-8971 Located at ▶ 2810 ROUSE AVENUE, CHEVENNE, WY 1 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. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 1 determined the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 1 but the organization a controlled entity of the organization within the meaning of section 512(b)(13)? I	a	Initiation fees and capital contributions included on line 9 39a N/A		İ	
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0.; section 4912 ▶ 0.; section 4912 ▶ 0.; section 4955 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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 organizations prior Forms 990 or 990-E72 if Yes,* complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If Yes,* complete Form 8866-T List the states with which a copy of this return is filed. ▶ NONE 1 the organization's books are in care of ▶ BRUCE HENNING Located at ▶ 2810 HOUSE AVENUE, CHEYENNE, WY b 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. See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If Yes,* enter the name of the foreign country. ▶ Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 40 Did the organization maintain any donor advised funds? If Yes,* Form 990 must be completed instead of Form 990-EZ s any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If Y	b	Gross receipts, included on line 9, for public use of club facilities 39b N/A]	٧ŧ	
Section 4911 ▶ 0.; section 4912 ▶ 0.; section 4912 ▶ 0.; section 4912 ▶ 0. b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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-E2? If "Yes," complete Schedule L, Part I c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization. Any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 886-T List the states with which a copy of this return is filed. ► NONE 11 List the states with which a copy of this return is filed. ► NONE 12 The organization's books are in care of ► BRUCE HENNING Located at ► 2810 HOUSE AVENUE, CHEYENNE, WY 13 A tany 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 accounts accounts 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 c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 14 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ 15 Is any related organization a controlled entity of	40 a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:]),	` ·	. 🐉
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Førm 990-6	Z(2009) THE CHEYENNE SCHOOLS FOU	NDATION		83-03130	84 Page 4
Part VI	Section 501(c)(3) organizations and section 4 organizations and section 4947(a)(1) nonexempt charitable and 51	1947(a)(1) nonexempt		sts only. All s	ection 501(c)(3)
office 47 Did th 48 Is the 49a Did th b If "Ye 50 Comp	the organization engage in direct or indirect political campaign activities? If "Yes," complete Schedule C, Part I be organization engage in lobbying activities? If "Yes," complete Schedular a school as described in section 170(b)(1)(A)(ii)? If "Yes be organization make any transfers to an exempt non-charitable related s," was the related organization a section 527 organization? Diete this table for the organization's five highest compensated employers \$100,000 of compensation from the organization.	nedule C, Part II s," complete Schedule E organization? ees (other than officers, directors		-	Yes No 46
	(a) Name and address of each employee paid more than \$100,000 NONE	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
51 Comp	number of other employees paid over \$100,000 blete this table for the organization's five highest compensated independization. If there is none, enter "None."	dent contractors who each recen	ved more than \$100,	000 of compensat	ion from the
	NONE (a) Name and address of each independent contractor paid more	than \$100,000	(b) Type of ser	vice (c)	Compensation
d Total	number of other independent contractors each receiving over \$100,000	n			
Sign Here	Under penalties of perjury, I declare that that examined this return, including accorrect, and complete Declaration of rigorare when than officer) is based on all signature of officer Type or print name and title	ccompanying schedules and statemen information of which preparer has any	knowledge	knowledge and belie A 1 - 31 Date	
Paid Preparer's Use Only	Preparer's signature Firm's name (or yours MCGEE, HEARNE & PAIZ, if self-employed) P. O. BOX 1088	, , , , , , , , , , , , , , , , , , , ,	ck if self- ployed Prep.		nber (See instr.)
	address, and ZIP+4 CHEYENNE, WY 82003		no	307-63	4-2151

CHEYENNE, WY 82003

May the IRS discuss this return with the preparer shown above? See instructions

307-634-2151

► X Yes No Form 990-EZ (2009)

SCHEDULE A

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

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

Open to Public

Inspection Employer identification number

Schedule A (Form 990 or 990-EZ) 2009

	···		YENNE SCHOOL						8.	<u>3-0313</u>	084
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st comple	te this par	t) See ins	tructions			
The organ	ization is not a	a private foundation	because it is (For lines	1 through	11, check	only one b	ox)				
1 🖳	A church, co	nvention of churche	s, or association of chur	ches desc	rıbed ın se	ection 170	(b)(1)(A)(i)).			
2 🖳	A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E)							
з 🔛	A hospital or	a cooperative hospi	tal service organization (described	ın section	170(b)(1)	(A)(III).				
4	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 stat	e									
5	An organizati	on operated for the	benefit of a college or ui	niversity o	wned or op	perated by	a governi	mental un	it describe	ed in	
	section 170	(b)(1)(A)(iv). (Comple	ete Part II)								
6	A federal, sta	ite, or local governm	ent or governmental uni	t describe	d in sectio	n 170(b)(1)(A)(v).				
7 X	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general p	oublic desc	ribed in
	section 170(b)(1)(A)(vi). (Comple	te Part II)								
8 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)						
9 🔲	An organizati	on that normally rec	eives (1) more than 33	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, ar	nd gross re	ceipts from
	activities rela	ted to its exempt fur	nctions - subject to certa	an excepti	ons, and (2) no more	than 33 1	1/3% of its	support	from gross	investment
	income and t	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	anization a	after June 3	30, 1975
	See section	509(a)(2). (Complete	Part III)								
10	An organizati	on organized and or	perated exclusively to te	st for publ	ıc safety. S	See sectio	on 509(a)(4	1).			
11 🔲	An organizati	on organized and op	perated exclusively for the	ne benefit (of, to perfo	orm the fu	nctions of,	or to carr	y out the	purposes o	of one or
	more publicly	supported organiza	itions described in secti	on 509(a)([.]	1) or section	on 509(a)(2	2) See se o	ction 509(a)(3). Che	ck the box	that
	describes the	e type of supporting	organization and compl	ete lines 1	1e through	11h					
	a Type	l b	J Type II d	Тур 📖	e III - Fund	tionally int	tegrated		d L	Type III - 0	Other
е 🔛	By checking	this box, I certify tha	t the organization is not	controlled	I directly o	r indirectly	by one o	r more dis	qualified p	persons oth	c described in oss receipts from gross investment June 30, 1975 oses of one or le box that e III - Other ns other than on 509(a)(2) Yes No 11g(i)
	foundation m	nanagers and other t	han one or more publicly	y supporte	d organiza	itions des	cribed in s	ection 509	9(a)(1) or s	section 509)(a)(2)
f	If the organiz	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III			
	supporting o	rganization, check th	nis box								
9	Since Augus	t 17, 2006, has the c	rganization accepted ar	ny gift or co	ontribution	from any	of the foli	owing per	sons?		
	(i) A perso	n who directly or ind	irectly controls, either al	one or tog	ether with	persons o	described	ın (ıi) and ((III) below,		Yes No
	the gove	erning body of the si	upported organization?							11g(i)	
	• • •	•	n described in (i) above?							11g(ii)	
	• •	•	person described in (i) o							11g(iii)	
h	Provide the f	ollowing information	about the supported or	ganızatıonı	(s)						
		···	(iii) Tupe of	T				1	. 1		
	of supported	(ii) EIN	(iii) Type of organization		organization sted in your		u notify the tion in col.	(vi) ls organizati	s tne on in col.		
orga	anızatıon		(described on lines 1-9		document?	, ,	r support?	(ı) organız U.S	red in the	sup	port
			above or IRC section	-				 			
			(see instructions))	Yes	No	Yes	No	Yes	No		
				 					 		
				 						· · · · · · · · · · · · · · · · · · ·	escribed in receipts from oss investment the 30, 1975 es of one or box that 1 - Other other than 509(a)(2) Yes No (ii) (iii)
· - - _•											
Total					[[}		

Form 990 or 990-EZ.

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

Schedule'A (Form 990 or 990 EZ) 2009 THE CHEYENNE SCHOOLS FOUNDATION 83-03130 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I)

<u> </u>	ction A. Public Support						
Cale	endar 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")	34,852.	22,591.	34,928.	50,251.	48,481.	191,103.
2	Tax revenues levied for the organ-						
	ization'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	34,852.	22,591.	34,928.	50,251.	48,481.	191,103.
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			S 38 4	,	, and the second	
	amount shown on line 11,	,				6	
	column (f)	%x		<u>.</u>		3 48%	
	Public support. Subtract line 5 from line 4	<u> </u>	, 3,000	₩ '			<u>191,103.</u>
	tion B. Total Support	r			-	····	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 4	34,852.	22,591.	34,928.	50,251.	48,481.	191,103.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	1,035.	1,294.	1,022.	283.	1.	3,635.
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)	* **,					404 500
	Total support. Add lines 7 through 10	L					194,738.
	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for	=	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	
Sec	organization, check this box and stor ction C. Computation of Publ	ic Support Pei	rcentage		 , , , , , , , , , , , , , , , , , ,		
	Public support percentage for 2009 (I			column (f))		14	98.13 %
	Public support percentage from 2008		,	(7)		15	97.85 %
	33 1/3% support test - 2009. If the o			line 13. and line 1	4 is 33 1/3% or m	· · · · · · · · · · · · · · · · · · ·	
	stop here. The organization qualifies	_					▶X
b	33 1/3% support test - 2008. If the o		_		ine 15 is 33 1/3%	or more, check th	
	and stop here. The organization qual	-					▶□
17a	10% -facts-and-circumstances tes		• •		13, 16a, or 16b, a	nd line 14 is 10%	or more.
_	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						▶ □
b	10% -facts-and-circumstances tes	_			•	7a, and line 15 is	10% or
	more, and if the organization meets the						
	organization meets the "facts-and-circ				•		
18	Private foundation. If the organization		•	· · · · · · · · · · · · · · · · · · ·			s
						·	or 990-EZ) 2009

Section A. Public Support		Described iii	Section Jose	(Complete only	if you checked the bo	ox on line 9 of Part I.
Calendar year (or fiscal year beginn		(b) 2006	(c) 2007	(d) 2008	(e) 2009	(6) Total
Gifts, grants, contributions, a	· · · · · · · · · · · · · · · · · · ·	(0) 2000	(0) 2007	(u) 2000	(6) 2009	(f) Total
membership fees received (I						
include any "unusual grants						
,	·	 		-		
2 Gross receipts from admission merchandise sold or services						
formed, or facilities furnished	·					
any activity that is related to						
organization's tax-exempt pu						
3 Gross receipts from activities						
are not an unrelated trade or	· bus-	•	İ			
iness under section 513						
4 Tax revenues levied for the o	organ-				•	
ization's benefit and either pa	aid to		·		,	
or expended on its behalf						
5 The value of services or facili	ities					
furnished by a governmental	unit to					
the organization without chai	rge					
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1,	, 2, and	•				
3 received from disqualified p	persons					
b Amounts included on lines 2 and 3 rec	eived				-	
from other than disqualified persons the	1		ļ	}		
exceed the greater of \$5,000 or 1% of amount on line 13 for the year	the					
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from	n line 6)	725 3		* %		
Section B. Total Support	in line of				·	
Calendar year (or fiscal year beginn	ning in) ▶ (a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	, , , , , , , , , , , , , , , , , , , ,		1		(4)	
10a Gross income from interest,						
dividends, payments receive			t 	į		
securities loans, rents, royalt and income from similar sour						
b Unrelated business taxable incom	<u> </u>				-	
(less section 511 taxes) from but						
acquired after June 30, 1975	000000					
c Add lines 10a and 10b						·
11 Net income from unrelated b	usiness	 				
activities not included in line	10b,					
whether or not the business	ıs					
regularly carried on 12 Other income Do not include	e dain					
or loss from the sale of capita						
assets (Explain in Part IV)				<u> </u>		·
13 Total support (Add lines 9 10c 11,			-1.611661-1	1	504()(0)	
14 First five years. If the Form 9		s tirst, second, thir	α, τουπη, or τίπη τ	ax year as a section	n 501(c)(3) organiz	ation,
Check this box and stop here						
Section C. Computation of	· · · · · · · · · · · · · · · · · · ·					
15 Public support percentage for		•	column (f))		15	%
16 Public support percentage fr					16	%
Section D. Computation of						
17 Investment income percenta			ne 13, column (f))		17	%
18 Investment income percenta	·				18	%
19a 33 1/3% support tests - 200	09. If the organization did i	not check the box	on line 14, and line	e 15 is more than 3	3 1/3%, and line 1	7 is not
more than 33 1/3%, check th	nis box and <mark>stop here.</mark> The	organization quali	fies as a publicly s	upported organiza	tion	
b 33 1/3% support tests - 200	08. If the organization did r	not check a box or	line 14 or line 19a	a, and line 16 is mo	re than 33 1/3%, a	and
line 18 is not more than 33 1/	/3%, check this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	rted organization	▶□
20 Private foundation. If the or	ganization did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	tructions	▶□
					edule A (Form 996	nr 990-EZ) 2000

SCHEDULE G (Form 990 or 990-EZ)

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.

2009

Open To Public Inspection

Schedule G (Form 990 or 990-EZ) 2009

Internal Revenue Service

Name of the organization

Department of the Treasury

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

Employer identification number

THE CHE	YENNE SCHOOLS FOUN	IDATI	ON	·	83-0313	084
Fundraising Activities required to complete this par	Complete if the organization answer	ered "Yes	s" to	Form 990, Part IV, I		
 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of no tion of go fundrais i (includin profession	on-go overrang e ng of nal fu	overnment grants nment grants events fficers, directors, trus undraising services?	stees or Yes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Die fundrais have custe or contro contribution	tody	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes 1	No		_	
otal 3 List all states in which the organizatio	n is registered or licensed to solicit t	funds or l	has	been notified it is ex	empt from registrati	on or licensing
					·	

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

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (a) Event #1 (c) Other events (b) Event #2 (d) Total events NONE (add col (a) through CSF WALK/RUN col (c)) (event type) (event type) (total number) Revenue 1 Gross receipts 48,481 48,481. 2 Less Charitable contributions 7,500 7,500. 40,981 Gross income (line 1 minus line 2) 40,981. 3 Cash prizes 3,073. Noncash prizes 3,073. 5 Direct Expenses 6 Rent/facility costs 7 Food and beverages 8 Entertainment 10,726. 10,726. Other direct expenses 13,799; 10 Direct expense summary Add lines 4 through 9 in column (d) 27,182. Net income summary Combine line 3, column (d), and line 10 Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) 1 Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes 4 Rent/facility costs Other direct expenses Yes Yes Yes Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? <u>9a</u> b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

administer charitable gaming?

Schedule G (Form 990 or 990 EZ) 2009 THE CHEYENNE SCHOOLS FOUNDATION	83-031	308	4 Pa	age 3
			Yes	
13 Indicate the percentage of gaming activity operated in				
a The organization's facility	%		-	
b An outside facility	%			
14 Enter the name and address of the person who prepares the organization's gaming/special events books and reco	ords			
Name ▶			:	
Address ▶				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		15a		
b if "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$	ount			
c If "Yes," enter name and address of the third party				
Name				,
Address ▶			·	
16 Gaming manager information				
Name ▶				
Gaming manager compensation ▶ \$				
Description of services provided				. ,
Director/officer Employee Independent contractor	•			
17 Mandatory distributions			:	,
a Is the organization required under state law to make charitable distributions from the gaming proceeds to				
retain the state gaming license?		17a		
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent organization's own exempt activities during the tax year ▶ \$	in the			

Schedule G (Form 990 or 990-EZ) 2009

FORM 990-EZ CASH GRANTS AND ALLOCA	TIONS	STATEMENT 1
CLASS OF ACTIVITY/GRANTEE'S NAME AND ADDRESS	GRANTEE'S RELATIONSHIP	AMOUNT
STUDENT ENRICHMENT MINI GRANTS	NONE	21,274.
EXCELLENCE IN EDUCATION GRANT	NONE	10,389.
OTHER GRANTS	NONE	7,600.
TOTAL INCLUDED ON FORM 990-EZ, LINE 10		39,263.

FORM 990-EZ	INFORMATION REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS		TATE	MENT	2
DIRECTLY OF	ANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL TRACT?	[]	YES	[X]	NO
	ANIZATION, DURING THE YEAR, PAY PREMIUMS, INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?	[]	YES	[X]	NO

FORM 990-EZ	90-EZ PART IV - LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES					STATE	MENT 3
NAME AND ADDRESS				TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
MARY QUAST 2810 HOUSE AVENUE,	CHEYENNE,	WY	82001	VICE PRESIDENT	0.	0.	0.
					0.		
BRUCE HENNING 2810 HOUSE AVENUE,				TREASURER	0.	0.	0.
SUE RISKE 2810 HOUSE AVENUE,				GRANTS CHAIRPE		0.	0.
TED ADAMS 2810 HOUSE AVENUE,	CHEYENNE,	WY	82001	BOARD MEMBER 1.00	0.	0.	0.
JIM CREEL 2810 HOUSE AVENUE,	CHEYENNE,	WY	82001	PAST PRESIDENT 1.00	0.	0.	0.
MARGUERITE HERMAN 2810 HOUSE AVENUE,	CHEYENNE,	WY	82001	1.00	0.	0.	0.
SEAN CHAMBERS 2810 HOUSE AVENUE,	CHEYENNE,	WY	82001	PRESIDENT 1.00	0.	0.	0.
2810 HOUSE AVENUE,	CHEYENNE,	WY	82009		0.	0.	0.
JAN STALCUP 2810 HOUSE AVENUE,	CHEYENNE,	WY	82009	LCSD1 BOARD CH	AIR 0.	0.	0.
ESTHER MARTINEZ 2810 HOUSE AVENUE,	CHEYENNE,			GRANTS CHAIRPE		0.	0.
DELLA BUCHMANN 2810 HOUSE AVENUE,	CHEYENNE,			BOARD MEMBER 1.00	0.	0.	0.
ALICIA BURKE 2810 HOUSE AVENUE,	CHEYENNE,			BOARD MEMBER 1.00	0.	0.	0.
SHARON CATALLIER 2810 HOUSE AVENUE,	CHEYENNE,			BOARD MEMBER 1.00	0.	0.	0.

THE CHEYENNE SCHOOLS FOUNDATION		83-03	13084
SHERYL FANNING BOARD MEMBER 2810 HOUSE AVENUE, CHEYENNE, WY 82001 1.00	0.	0.	0.
GEORGE MCILVAINE BOARD MEMBER 2810 HOUSE AVENUE, CHEYENNE, WY 82001 1.00	0.	0.	0.
NICOLE NOVOTNY SMITH BOARD MEMBER 2810 HOUSE AVENUE, CHEYENNE, WY 82001 1.00	0.	0.	0.
DAVID MILLER 2810 HOUSE AVENUE, CHEYENNE, WY 82001 1.00	0.	0.	0.
DR. MARK STOCK 2810 HOUSE AVENUE, CHEYENNE, WY 82001 LCSD1 SUPERINTENI 1.00	DENT 0.	0.	0.
TOTALS INCLUDED ON FORM 990-EZ, PART IV	0.	0.	0.

990-EZ PG 2

STATEMENT

4

EACH YEAR, THE GRANT PROGRAM PROVIDES SEVERAL EXCELLENCE IN EDUCATION GRANTS OF UP TO \$3,000 FOR INNOVATIVE DISTRICT-WIDE/SCHOOL-WIDE PROJECTS THAT BENEFIT LARGE GROUPS OF STUDENTS. IN ADDITION, MINI-GRANTS OF UP TO \$1000 ARE AWARDED TO TEACHERS FOR INNOVATIVE CLASSROOM PROJECTS THAT ADDRESS STUDENT NEEDS.

990-EZ PG 2

STATEMENT

5

TO ENGAGE COMMUNITY INTEREST AND SUPPORT FOR ENHANCED ACADEMIC, PERSONAL AND VOCATIONAL OPPORTUNITIES FOR LCSD#1 STUDENTS BEYOND THE CAPACITY OF THE LOCAL SCHOOL DISTRICT BUDGET.

Form **8368**

(Rev April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545 1709

you are filing for an Automatic 3-Month Extension, complete only Part I and check this box				
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2	-			
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previ		orm 8868		
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)				
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box a	and complete			
Part I only	ind complete			
•				
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to req to file income tax returns	juest an exte	nsion of time		
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic enoted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 e not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composity you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the elect www.irs.gov/efile and click on e-file for Charities & Nonprofits.	lectronically is se or consolid	f (1) you want th lated Form 990-1	e additional	
Type or Name of Exempt Organization	Emp	oloyer identifica	tion number	
print				
THE CHEYENNE SCHOOLS FOUNDATION	8	<u>33-031308</u>	4	
Number, street, and room or suite no. If a PO box, see instructions 2810 HOUSE AVENUE				
nstructions City, town or post office, state, and ZIP code. For a foreign address, see instructions				
CHEYENNE, WY 82001		<u> </u>	· <u>-</u>	
Check type of return to be filed (file a separate application for each return)				
Form 990 BL Form 990-T (sec 401(a) or 408(a) trust) X Form 990 EZ Form 990-T (trust other than above)	Form 4720 Form 5227 Form 6069 Form 8870			
BRUCE HENNING The books are in the care of ▶ 2810 HOUSE AVENUE - CHEYENNE, WY 820 Telephone No ▶ 307-632-8971 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box ▶ □ and attach a list with the names and EIN	_ If this is fo			
1 request an automatic 3 month (6-months for a corporation required to file Form 990-T) extension of the FEBRUARY 15, 2011 , to file the exempt organization return for the organization is for the organization's return for □ calendar year or □ X tax year beginning JUL 1, 2009 , and ending JUN 30, 201	amed above	The extension		
2 If this tax year is for less than 12 months, check reason Initial return Final return	ı 📙	Change in acco	unting period	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any				
nonrefundable credits. See instructions	3a	\$		
b If this application is for Form 990 PF or 990-T, enter any refundable credits and estimated				
tax payments made. Include any prior year overpayment allowed as a credit	3b	\$		
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,				
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)		1	_	
See instructions	3c	\$	N/A	
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and	d Form 8879	FO for payment	instructions	
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions		Form 996	8 (Rev. 4-2009)	