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SCANNED JUL 12 2012

Department of the Treasury

Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No 1545-0047

A	or the	2010 Calendar year, or tax year beginning 505 1, 2011 and	ending A	0G 31, 2011				
В	Check if applicable	C Name of organization		D Employer identif	ication number			
	Addres	BELLEVUE SCHOOLS FOUNDATION						
	Name change	Doing Business As		91-108	80997			
	Instial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er			
F	Termin			· '	456-4199			
F	ated Amend			G Gross receipts \$ 82,051				
F	lretum Applic							
,—	⊥itiòn pendir			H(a) Is this a group return for affiliates? Yes X No				
		F Name and address of principal officer:SARA SCHMIDT		for affiliates?				
		SAME AS C ABOVE	1 1	H(b) Are all affiliates in				
		empt status: x 501(c)(3) 501(c) () ((Insert no.) 4947(a)(1)	or 527	If "No," attach a	a list. (see instructions)			
		e: WWW.BSFDN.ORG		H(c) Group exemption	on number >			
		organization; x Corporation Trust Association Other	L Year	of formation: 1979	M State of legal domicile: WA			
P	art I	Summary						
-	1	Briefly describe the organization's mission or most significant activities: BELLEV	UE SCHOOL	S FOUNDATION				
Activities & Governance		PROMOTES AND HELPS FUND THE BEST POSSIBLE LEARNING OPPORTUNI						
Пa	2	Check this box I if the organization discontinued its operations or dispo	sed of more	than 25% of its net a	ussets.			
Š	_	Number of voting members of the governing body (Part VI, line 1a)		з	28			
Ö		Number of independent voting members of the governing body (Part VI, line 1b)		4	28			
රේ ග		Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	0			
ij				6	40			
ξį		Total number of volunteers (estimate if necessary)		 				
Š	7a	Total urrelated business revenue from Part VIII, column (C), line 12		<u>7a</u>				
	þ	Net unrelated business taxable indome from Form 990-T, line 34						
			<u> </u>	Prior Year	Current Year			
Ð		Sentinbutions and grafts (Part VIII) line 1h)	1,404,419	. 81,063.				
Revenue	9	Program-service revenue (Part VIII) line 2g)	<u> </u>	0,	. 0.			
ě	10	investmett) நிருந்து (Partivill, column (A), lines 3, 4, and 7d)	L	24,182	. 988.			
ш		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-47,010	. 0.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,381,591	. 82,051.			
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	851,312.	57,039.				
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	. 0.			
w	1	Salanes, other compensation, employee benefits (Part IX, column (A), lines 5-10)		317,160	. 59,885.			
Expenses	i	Professional fundraising fees (Part IX, column (A), line 11e)	•	0	. 0.			
)ec	1		771.					
Ň	1	. 542 141 41 41 41 41 41 41 41 41 41 41 41 41		85,226,	6,916.			
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<u> </u>	1,253,698,	123,840.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	—	1,233,030				
	19	Revenue less expenses. Subtract line 18 from line 12						
Net Assets or			Be	ginning of Current Year	End of Year			
Sset	20	Total assets (Part X, line 16)	<u> </u>	1,614,388,	1,425,499.			
¥	21	Total liabilities (Part X, line 26)		182,831,				
챨	22_	Net assets or fund balances. Subtract line 21 from line 20		1,431,557	1,372,061.			
		Signature Block						
		lties of perjury, I declare that I have examined this return, including accompanying schedule			ny knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wi	hich preparer	has any knowledge.				
		Jara belimedt	_	574/	12			
Sig	n	Signature of officer		Date				
He		SARA SCHMIDT, PRESIDENT						
		Type or print name and title			· · · · · · · · · · · · · · · · · · ·			
_		Print/Type preparer's name Preparer's signature	11	Date / Check	PTIN			
Pai	d	ROBERT J. FLEMING	Date / Check PTIN #/25//2 If self-employed P00179374					
_	parer ·	Firm's name CLARK NUBER, PS	Firm's EIN	91-1194016				
	Only			THIII S LIN				
Jac	, Only			Dhone no 4	25-454-4919			
		BELLEVUE, WA 98004		Phone no. 4				
Ma	v the li	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Form 990 (2010)

orm	990 (2010) , BELLEVUE SCHOOLS FOUNDATION	91-108099	7 Page 2
Par	t III Statement of Program Service Accomplishments		
-	Check if Schedule O contains a response to any question in this Part III		x
1	Briefly describe the organization's mission:	<u>_</u>	
	BELLEVUE SCHOOLS FOUNDATION PROMOTES AND HELPS FUND THE BEST POSSIBLE		
	LEARNING OPPORTUNITIES FOR ALL STUDENTS OF THE BELLEVUE SCHOOL		
	DISTRICT THROUGH DISTRICT WIDE ACADEMIC INITIATIVES, TEACHER		· -
	PROFESSIONAL DEVELOPMENT, COMMUNITY ENGAGEMENT, AND AN ARRAY OF		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		
	Did the organization cease conducting, or make significant changes in how it conducts, any program 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 services by ex	penses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of	grants and	
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$	evenue \$)
	ACADEMIC RIGOR:		
	SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM) - IN SEPTEMBER 2010,		· · · · · · · · · · · · · · · · · · ·
	SAMMAMISH HIGH SCHOOL WAS AWARDED A \$4.1 MILLION FEDERAL GRANT AS PART		
	OF THE U.S. DEPARTMENT OF EDUCATION'S INVESTING IN INNOVATION (13)		
	PROGRAM. THE WINNING PROPOSAL, "RE-IMAGINING COLLEGE AND CAREER		
	READINESS: STEM, EQUITY AND RIGOR IN A COMPREHENSIVE HIGH SCHOOL, " IS A		
	FIVE-YEAR BLUEPRINT TO IMPLEMENT PROBLEM-BASED LEARNING (PBL) CURRICULA		
	ACROSS ALL SUBJECT AREAS WITH SPECIAL EMPHASIS ON SCIENCE, TECHNOLOGY,		·
	ENGINEERING AND MATH. BELLEVUE SCHOOLS FOUNDATION WAS INSTRUMENTAL IN		
	SECURING 20% MATCHING FUNDS FROM THE PRIVATE SECTOR THAT IS REQUIRED TO		
	RECEIVE THE 13 GRANT AWARD. DURING JULY AND AUGUST 2011, PRIVATE SECTOR/BELLEVUE SCHOOLS FOUNDATION FUNDS PROVIDED PROFESSIONAL		
41	10.700	DVORUO C	
4b	(Code:) (Expenses \$19,786. including grants of \$16,641.) (Restriction of the student support:	everiue a	······································
	ADVANCEMENT VIA INDIVIDUAL DETERMINATION (AVID) - PROVIDES		
	COLLEGE-PREPARATORY STUDY SKILLS DEVELOPMENT FOR STUDENTS NOT ACHIEVING		
	POTENTIAL. THESE "AVERAGE" STUDENTS LEARN STUDY STRATEGIES,		
	ORGANIZATIONAL SKILLS, AND HABITS OF SUCCESSFUL LEARNERS. PROGRAM ALSO		
	TARGETS STUDENTS WHO WILL BE THE FIRST IN THEIR FAMILIES TO ATTEND		
	COLLEGE.		
		- .	
	VOLUNTEERS IN BELLEVUE'S EDUCATION SYSTEM (VIBES) MENTORING PROGRAMS -	·	
	SUPPORTS MENTORING PROGRAMS THAT SERVE APPROXIMATELY 4,500 STUDENTS		
	EACH YEAR IN BELLEVUE SCHOOLS, PROGRAMS INCLUDE ONE-TO-ONE		
	(TRADITIONAL) MENTORS, SMALL GROUP MENTORS, "AVID" MENTORS, SCIENCE		·-···
4c	(Code:) (Expenses \$ 7,761. including grants of \$ 5,273.) (Recommunity ENGAGEMENT:)
	ENRICHMENT AND INNOVATION GRANTS - COMPETITIVE SMALL GRANT PROGRAM		····
	FUNDS APPROXIMATELY 60 ENRICHMENT ACTIVITIES AND INNOVATIVE PROJECTS IN		
	BELLEVUE SCHOOL DISTRICT K-12 CLASSROOMS.		
	OTHER PROGRAM DISTRIBUTIONS - INCLUDES SCHOLARSHIP PROGRAMS SET UP IN		
	PRIOR YEARS FOR STUDENTS.		
			·
	DONOR DESIGNATED GIFTS - HONORING DONOR REQUESTS FOR FUNDS TO GO TO		· · · · · · · · · · · · · · · · · · ·
	SPECIFIC BELLEVUE SCHOOL DISTRICT PROGRAMS OR SCHOOLS NOT INCLUDED IN		·
	THE CURRENT YEAR BUDGET.		
4d	Other program services. (Describe in Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses ▶ 69,309.		
4e	Total program service expenses ► 69,309.		

Form 990 (2010) BELLEVUE SCHOOLS F Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	\vdash
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			\vdash
•	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			_
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	<u> </u>		
•	similar amounts as defined in Revenue Procedure 98-19? 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		х
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		х
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?			
	If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	14	, '	, -
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		_	
	Part VI	11a	Х	<u> </u>
þ	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	11b		<u> </u>
С	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	11c		х
а	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	110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	ا ۔ ا		v
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		<u> </u>
16	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	-10		-
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
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		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
-	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		х
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
		Form	990 (2010)

Form 990 (2010)

BELLEVUE SCHOOLS FOUNDATION

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	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			
ک	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
244	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
b	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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 committee 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 transaction with one of the following parties (see Schedule L, Part IV	٠,		١,
	instructions for applicable filing thresholds, conditions, and exceptions):			" .
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			u.
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			x
	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
20	If "Yes," complete Schedule N, Part I	31		
32	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		x
34	Was the organization related to any tax-exempt or taxable entity?			
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
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 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	
		Form 5	990 c	2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
12	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0	,		
	D. Lit	1		١.
С	(gambling) winnings to prize winners?	1c		
0-	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
za	filed for the calendar year ending with or within the year covered by this return 2a 0	-		, ·
L	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	~~~	1
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	20		<u> </u>
<u> </u>	The bound of the second of the	3a	-	X
	V N	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	30		
4 a		4a		x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?			-
b	If "Yes," enter the name of the foreign country:	ار با ا	. 3	٠,`
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	5a		ـــــــــــــــــــــــــــــــــــــ
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		x
þ		5c		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5 C		\vdash
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6-		x
	any contributions that were not tax deductible?	6a		-
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	er.		
_	were not tax deductible?	6 b	14	ر در م
7	Organizations that may receive deductible contributions under section 170(c).	~~~		X
a		7a		
b		7b		\vdash
С		7.		x
	to file Form 8282?	7c		-
d	•	~7e	<u> </u>	x
e		7f		x
f	the second secon	7g		
9	to the state of th	7h		
h	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	. 2		
8	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		:
^	Sponsoring organizations maintaining donor advised funds.			
9	District and the second of the second	9a		•
a	The state of the s	9b		
ь 10	Section 501(c)(7) organizations. Enter:		, -	<u> </u>
	A Land Control of the			5
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	- '	Ĺ	
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders 11a		-	
	Gross income from other sources (Do not net amounts due or paid to other sources against		л И	4
U	amounts due or received from them.)			l
19a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	-	`	;
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note. See the instructions for additional information the organization must report on Schedule O.		,	
h	Enter the amount of reserves the organization is required to maintain by the states in which the		-	
U	organization is licensed to issue qualified health plans	5.,		-
_	Enter the amount of reserves on hand		`	l
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x
ı ta	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
	n roo, man a mod a room rest to report arous paymenter a roo, promote a representation and a room rest and res			

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.

	Check if Schedule O contains a response to any question in this Part VI			X							
Sec	tion A. Governing Body and Management			,							
			Yes	No							
1a	Enter the number of voting members of the governing body at the end of the tax year 28	1	١.								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 28		'								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			ł							
	officer, director, trustee, or key employee?	2	_	X							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			ļ							
	of officers, directors or trustees, or key employees to a management company or other person?	3	ļ	Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	<u> </u>	Х							
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	<u>5</u>		X							
6	Does the organization have members or stockholders?										
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the										
	governing body?	7a		Х							
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		٠.								
	by the following:	~ .		i							
а	The governing body?	8a	Х	<u> </u>							
b	Each committee with authority to act on behalf of the governing body?	8b	Х								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the										
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L,	Х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		1								
			Yes	No							
	Does the organization have local chapters, branches, or affiliates?	10a		Х							
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	1									
	and branches to ensure their operations are consistent with those of the organization?	10b	-	<u> </u>							
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	х	<u> </u>							
b	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.										
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	x	ļ							
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise										
	to conflicts?	12b	X	<u> </u>							
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		Ì								
	in Schedule O how this is done	12c	Х								
13	Does the organization have a written whistleblower policy?	13	X	<u> </u>							
14	Does the organization have a written document retention and destruction policy?	14	x	<u> </u>							
15	Did the process for determining compensation of the following persons include a review and approval by independent	mark	l ·	,= ,							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		<u> </u>								
a	The organization's CEO, Executive Director, or top management official	15a	X	<u> </u>							
b	Other officers or key employees of the organization	15b	_	х							
40	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	\$ 1 ² 11.	ľ								
Iba	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		ļ	x							
	taxable entity during the year?	16a	<u> </u>								
D	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	<i>*.</i> /									
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's	466	-								
Sec	exempt status with respect to such arrangements? tion C. Disclosure	16b	<u> </u>	i.							
17	List the states with which a copy of this Form 990 is required to be filed ►WA										
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for									
10	public inspection. Indicate how you make these available. Check all that apply.	101									
	Own website Another's website X Upon request										
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, ai	nd finn	ncial								
פו	statements available to the public.	iu iii id	ııcıaı								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	tion: 🕨	•								
£.U	JANICE LEITZKE - 425-456-4199										
	PO BOX 40644, BELLEVUE, WA 98015-4644										

D	7
Page	

Form 990 (2010)

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

Check if Schedule O contains a response to any question in this Part VII

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

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)	Ĭ		(((D)	(E)	(F)
Name and Title	Average hours per week	ا	neck	Pos all t			ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуев	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
SARA SCHMIDT										
PRESIDENT	10,00	Х	L_	х				0.	0.	0.
TRUDI JACKSON		1	ł							
PRESIDENT ELECT	5.00	х		Х		<u> </u>	<u> </u>	0.	0.	0.
JEFF HANSEN				ŀ						
PAST PRESIDENT	5.00	Х		Х				0.	0.	0.
RONNA WELTMAN					İ					
VP MARKETING	5.00	Х	L	Х	_			0.	0.	0.
CATHY HABIB										
VP GRANTMAKING	5.00	х		х	L			0.	0.	0.
LEENA PORWAL					l	1	ĺ			
VP RESOURCE DEVELOPMENT	5.00	Х	<u> </u>	Х		L		0.	0.	0.
RANDY SMITH					ĺ		ŀ			
VP GOVERNANCE	5.00	X		X				0.	0.	0.
BRIAN JONAS							1			
TREASURER	5.00	х		х	L	L		0.	0.	0.
BILL POLLARD				İ						
AT-LARGE	1.00	х		х			<u> </u>	0,	0.	0,
PETER BENTLEY						ļ				1
BOARD MEMBER	1.00	X						0.	0.	0.
MATT BOMBERGER								}		
BOARD MEMBER	1.00	X						0.	0,	0.
LISA BRANDLI										
BOARD MEMBER	1.00	X						0.	0,	0.
BILL DEJARLAIS										
BOARD MEMBER	1.00	Х			l			0.	0.	0.
MARCO DE SA E SILVA		ĺ								
BOARD MEMBER	1.00	х	<u> </u>					0.	0.	0.
REAGAN DUNN										
BOARD MEMBER	1.00	х	<u> </u>					0.	0.	0.
PERRY ENGLAND										
BOARD MEMBER	1.00	х				L		0.	0.	0.
GREG FEIGES										-
BOARD MEMBER	1.00	х				<u> </u>		0.	0.	0.

Part VII Section A. Officers, Directors, Tru	ıstees, Key Er (B)	mpl I	oyee		<u>nd l</u> C)	High	est				ı — —	/ C\	
(A)	Average			Pos	•	1		(D) Reportable	(E) Reportable	J	₌ ,	(F) stimate	-d
Name and title	hours per	l (c	heci				oly)	compensation	compensatio				
	week	H	T	Ι	<u> </u>	Ė	Ë	from	from related			other	
	(describe	or director						the	organizations		con	npensa	ition
	hours for	0	98			Safed		organization	(W-2/1099-MIS	SC)	l	rom th	
	related organizations	ruste	lt trus		89	E De		(W-2/1099-MISC)		organı			
	in Schedule	ਕ	institutional trustee	_	Кеу етріоуев	estco	١					id relat anızatı	
	O)	ığı	Instit	Officer	Keye	Highest compensated employes	Former				0.9		0,10
KARYN FURSTMAN													
BOARD MEMBER	1.00	X	ļ	ļ		<u> </u>	<u> </u>	0.		0.	<u> </u>		0.
JON GARBERG ,		۱		ŀ		Ì				•			^
BOARD MEMBER	1.00	Х	╀	⊢		\vdash	-	0.	· · · · · · · · · · · · · · · · · · ·	0.			0
MARIANNE HEYWOOD BOARD MEMBER	1.00	x			l		1	0.		0.			0.
RODERICK JONES	1.00	Ĥ	╁╌	╁┈	⊢	┢	\vdash				-		
BOARD MEMBER	1.00	х					1	0.		ο.			0.
TIFFANY KOENIG		-	\vdash	\vdash	\vdash	H	┢				-		
BOARD MEMBER	1.00	x	1					0.		Ο.			0.
JANET LEVINGER		T	T		 	1	 				\vdash		
BOARD MEMBER	1.00	х						0.		٥.			0.
MICHAEL MARCHAND		Π										•	
BOARD MEMBER	1.00	х				<u>L.</u>		0.		0.			0 .
KIM MOLONEY		1	1				1			j	İ		
BOARD MEMBER	1.00	X	<u> </u>	<u> </u>	<u> </u>	╙	╙	0.		0.	ļ		0,
BETH NOTARI		l	1		ł					•			•
BOARD MEMBER	1.00	X	<u> </u>	<u> </u>	L	Ļ.	L	0.		0.			0.
ib Sub-total								0.			 0.		
c Total from continuation sheets to Part V	II, Section A							0.		0.	 		0.
d Total (add lines 1b and 1c) 2 Total number of individuals (including but r	not limited to th	2086	a list	ed a	boy	e) w	ho r	<u> </u>	000 in reportabl		<u>L</u>		
compensation from the organization		.000						oodii od iiioi o triaii y i o	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				C
												Yes	No
3 Did the organization list any former officer			e, ke	y en	olqr	yee,	or I	highest compensated er	nployee on		12.	·	. 1
line 1a? If "Yes," complete Schedule J for s					_*!				*b		3	-	X
4 For any individual listed on line 1a, is the si and related organizations greater than \$15									the organization		€%*\ 4	الأكسان أ	<u> </u>
5 Did any person listed on line 1a receive or									dual for services	•		,	- +
rendered to the organization? If "Yes," con											5	٠, د	x
Section B. Independent Contractors													
Complete this table for your five highest co the organization NONE	ompensated in	dep	end	ent c	ont	ract	ors 1	that received more than	\$100,000 of com	pens	ation	from	
the organization. NONE				-				(B)			((C)	
Name and business	address							Description of s	ervices	C	ompe	nsatio	n
		-					\dashv						
									ŀ				
							寸						
			_				_						
							\dashv						
	- د د ا - جرامر با مرسا				.			d abaya) who recented	oro thor			-	
2 Total number of independent contractors (\$100,000 in compensation from the organi		iUl I	1111116	:u 10	u 10	o 0	عنو <u>ن</u>	above) who received if	IOIE UIAII	; - •	• ;	1	_'

Form **990** (2010)

032009 12-21-10

Statement of Revenue Part VIII (**D)** Revenue (A) (B) (C) Related or Unrelated Total revenue excluded from exempt function business tax under sections 512, 513, or 514 revenue revenue 1a 1 a Federated campaigns 1b Membership dues 1c Fundraising events d Related organizations Government grants (contributions) 1e All other contributions, gifts, grants, and 81,063 similar amounts not included above g Noncash contributions included in lines 1a-1f: \$ 81,063 Total. Add lines 1a-1f **Business Code** Program Service All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 988 988 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross Rents b Less: rental expenses 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) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances . **b** Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a All other revenue Total, Add lines 11a-11d 82,051. Total revenue. See instructions. 988. 12

Part IX | Statement of Functional Expenses

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

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

(A) Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses generăl expenses expenses Grants and other assistance to governments and 57,039 57,039 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in . ٠, 2 . . . the U.S. See Part IV. line 22 150 74 Grants and other assistance to governments, yr. organizations, and individuals outside the U.S. 12. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 16,480 2,966 4,120 9.394. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 6,442 20,400. 35,790 8,948 7 Other salanes and wages 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 2,128 383 532 1,213. Other employee benefits 988 1,372 5,487 3.127. 10 Pavroll taxes Fees for services (non-employees): Management b Legal C Accounting Lobbying d Professional fundraising services. See Part IV, line 17 Investment management fees 2,252 2,252 a 1,565 1,245 320 12 Advertising and promotion 1,279 246 1,017 16. 13 Office expenses 14 Information technology 15 Rovalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 266 266. 19 Conferences, conventions, and meetings 20 Interest Payments to affiliates 21 471 471 22 Depreciation, depletion, and amortization 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) BANK & TRANSACTION FEES 417 417 b C d 666 631 35. All other expenses 123,840 69,309 19,760 34,771. Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here
if following SOP 26 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Part X | Balance Sheet (A) Beginning of year End of year 125 128. Cash - non-interest-bearing 1 478,102, 336 154. 2 2 Savings and temporary cash investments 241,742. 218,609. 3 3 Pledges and grants receivable, net 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key . . . employees, and highest compensated employees. Complete Part II Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Notes and loans receivable, net 8 Inventories for sale or use 1,880. 8,422. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 37,605 basis. Complete Part VI of Schedule D 10a 34,576 3,500 3,029. 10b 10c **b** Less: accumulated depreciation 840,492, 812,610. 11 Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 13 Investments - program-related. See Part IV, line 11 14 14 Intangible assets 48,547 46,547. 15 Other assets. See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 1,614,388 1,425,499. 16 16 182 831. 17 53,438, Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities. Complete Part X of Schedule D 25 25 182,831 53,438. 26 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117, check here > X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 709,424 660,196. Unrestricted net assets 27 27 303,302, 28 293,034. 28 Temporarily restricted net assets 418 831 29 418 831 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 1,431,557 33 1,372,061. 33 Total net assets or fund balances 1,614,388 1,425,499. Total liabilities and net assets/fund balances

Form	990 (2010) BELLEVUE SCHOOLS FOUNDATION	91-1080997		Pa	ge 12		
Pai	t XI Reconciliation of Net Assets	·					
	Check if Schedule O contains a response to any question in this Part XI				х		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	82,051				
2	Total expenses (must equal Part IX, column (A), line 25)	2	123,840 -41,789				
3	Revenue less expenses. Subtract line 2 from line 1						
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1		,557. ,707.		
5	5 Other changes in net assets or fund balances (explain in Schedule O) 5						
6							
Pa	rt XIII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				İ		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
b	Were the organization's financial statements audited by an independent accountant?		2b		х		
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	<u> </u>		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			l -	```		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a		l	,		
	separate basis, consolidated basis, or both:		, ' '		, ',		
	Separate basis Consolidated basis Both consolidated and separate basis		-				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Audıt		ŀ			
	Act and OMB Circular A-133?		3a	<u> </u>	x		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	red audit					
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	-	3b		L		
			Form	990 (2010)		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

2010

Open to Public Inspection

Employer identification number

		BELLEVUE SO	CHOOLS FOUNDATION						91	-1080997		
Part I	Reason	for Public Char	ity Status (All organiz	ations mu	ist comple	te this par	t.) See ins	tructions.				
The organ	ization is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)					
1 🔲	A church, coi	nvention of churches	s, or association of chur	ches desc	ribed in se	ction 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 hospital service organization described in section 170(b)(1)(A)(iii).											
4 🗀	•	•	operated in conjunction					(b)(1)(A)(ii	i). Enter	the hospital	's name	.
,	city, and stat	=			•				•			
5 🗔	_		benefit of a college or ur	niversity o	wned or or	perated by	a govern	mental uni	t describ	ed in		
_	section 170(b)(1)(A)(iv). (Complete Part II.)											
6	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7 X		-						or from the	general	public desc	ribed in	
	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)											
в 🗀	-		ection 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 🔲			erves: (1) more than 33			rom contr	ibutions, n	nembershi	n fees. a	nd aross re	ceints fr	nm
	•	•	nctions - subject to certa							•	•	
		•	axable income (less sect	-	· · ·					•		
		509(a)(2). (Complete			,			, u. g.		u 0u0 0	,,,,,,,	•
10 🔲			perated exclusively to te	st for pub	lic safety. S	See sect io	n 509(a)(4	4).				
11 🗖	•	-	· · · · · · · · · · · · · · · · · · ·	-	-			-	v out the	purposes d	of one or	r
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that											
			organization and compl		-		,	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	a Type I		¬ ·		e III - Func		tegrated		d□	Type III - 0	Other	
е 🗀			it the organization is not			-	-	r more disc	gualified			
	=		han one or more publicly						•	="		
f		•	ten determination from t		_				(-)(-)		(-7(-)	
	_	rganization, check th	_		•		, ,,					
g		•	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing per	sons?			
Ū	•		rectly controls, either al								Yes	No
			upported organization?			•		,,,,,	•	11g(i)		
	-		n described in (i) above?							11g(ii)		
	•	-	person described in (i) o		e?			•	• •	11g(iii)		
h	• •	-	about the supported or	• • •					•	<u> </u>	<u> </u>	
		· ·	• • • • • • • • • • • • • • • • • • • •	•	, ,							
(i) Name	of supported	(ii) EIN	(iii) Type of	(iv) Is the	organization	(v) Did you	u notify the	(vi) Is	the	(vii) Am	nount of	
	anization	(,	organization (described on lines 1-9		sted in your		ion ın col.	organizátio (i) organiz			port	
_			above or IRC section	governing	document?	(i) of you	r support?	U.S.	.?			
			(see instructions))	Yes	No	Yes	No	Yes	No			
					ļ							
									<u> </u>	_		
		_										
_												
												
				<u> </u>								
		-	. ,		1	-	, ,					

Schedule A (Form 990 or 990-EZ) 2010 BELLEVUE SCHOOLS FOUNDATION 91-1080997

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,391,356.	1,199,246.	1,403,487.	1,404,419.	81,063.	6,479,571.
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	2,391,356.	1,199,246.	1,403,487.	1,404,419.	81,063.	6,479,571.
5	The portion of total contributions	,*,	i, 2	m 1	K + Ball Mar I s	-4. Yes	
	by each person (other than a	· , ~ (1311, 1741	11,5° W S "	5 / 45 () 2 / 35 () -	
	governmental unit or publicly	,	,	. *	Sec. 1	1.	
	supported organization) included		, , -	5 .3.	أو المؤلم المرافي	73 3 3	
	on line 1 that exceeds 2% of the	-contract that we		300 300 80	17 7 7 1/20 1 1 -	ant 145, 1 2 -	
	amount shown on line 11,	3. 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		1,210	the field was the	sin make the safety	
	column (f)	100	11-	and process of the	1 2 30	يكوم معول	1,912,232.
6	Public support. Subtract line 5 from line 4	_ >	ک د سه در په پروا	1	, , ,	, n , ,	4,567,339.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	2,391,356.	1,199,246.	1,403,487.	1,404,419.	81,063.	6,479,571.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	78,654.	39,329.	18,668.	22,022.	988.	159,661.
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.)	891.			1,080.		1,971.
11	Total support. Add lines 7 through 10			1 4	S (100)	A 4,21 1 1 2	6,641,203.
12	Gross receipts from related activities,	•	•			12	
13	First five years. If the Form 990 is for	-	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	. 🗀
800	organization, check this box and storetion C. Computation of Publ	here	roontago	· · ·			<u>. </u>
					····		69.77
	Public support percentage for 2010 (•	column (f))		14	68.77 %
	Public support percentage from 2009				14 00 1/00/	15	67.69 %
16a	33 1/3% support test - 2010.If the o	•		•	14 IS 33 1/3% OF M	ore, cneck this box	and ▶X
_	stop here. The organization qualifies		-		lung 15 in 22 1 /20/		
D	33 1/3% support test - 2009.If the o				iiile 15 is 33 1/3%	or more, check this	s box ▶□
47-	and stop here. The organization qual 10% -facts-and-circumstances tes	· · · · · · · · · · · · · · · · · · ·					r mara
1/a		-					•
	and if the organization meets the "fact					t iv now the organi	zation
	meets the "facts-and-circumstances"	_	•		•		20% 0"
b	10% -facts-and-circumstances tes	=					J% Of
	more, and if the organization meets the						<u> </u>
40	organization meets the "facts-and-circ						? -
<u> 18</u>	Private foundation. If the organization	н иш посспеска	DOX OH LINE 13, 16	a, 100, 1/a, 01 1/1	o, check this box a	ina see instructions	

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support	Joio III, piodeo Goill	Siste Fare my				
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in				Į.		
any activity that is related to the organization's tax-exempt purpose				-		
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513				1		
4 Tax revenues levied for the organ-			-	 		
ization's benefit and either paid to						
or expended on its behalf						
					· · · · · · · · · · · · · · · · · · ·	
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
				+		
6 Total. Add lines 1 through 5	-			+		-
7a Amounts included on lines 1, 2, and	1					1
3 received from disqualified persons b Amounts included on lines 2 and 3 received	· 			+	 	
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the		,				
amount on line 13 for the year					- -	
c Add lines 7a and 7b	ļ		v			
8 Public support (Subtract line 7c from line 6) Section B. Total Support	<u> </u>	· · · · · ·	-		, , , , , , , , , , , , , , , , , , ,	
	(-) 0000	(b) 2007	(=) 2009	(4) 2000	(=) 2010	(f) Tetal
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6				1		
10a Gross income from interest, dividends, payments received on						
securities loans, rents, royalties						1
and income from similar sources		1		-		
b Unrelated business taxable income						1
(less section 511 taxes) from businesses	•					
acquired after June 30, 1975						ļ
c Add lines 10a and 10b				-		<u> </u>
11 Net income from unrelated business activities not included in line 10b.	;					
whether or not the business is		1				
regularly carned on				<u> </u>		
12 Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.)					ļ	ļ
13 Total support (Add lines 9, 10c, 11, and 12)		<u></u>		l	l	<u> </u>
14 First five years. If the Form 990 is f	or the organization'	s first, second, thir	d, fourth, or fifth	tax year as a sectio	n 501(c)(3) organi	zation,
check this box and stop here					<u>_</u>	_
Section C. Computation of Put	olic Support Pe	ercentage				
15 Public support percentage for 2010	(line 8, column (f) o	divided by line 13, o	column (f))		15	%
16 Public support percentage from 200				-	16	%
Section D. Computation of Inve	estment Incom	e Percentage				
17 Investment income percentage for 2	2010 (line 10c, colu	mn (f) divided by lir	ne 13, column (f))		17	%
18 Investment income percentage from	n 2009 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2010. If th			on line 14, and lır	ne 15 is more than 3	33 1/3%, and line	17 is not
more than 33 1/3%, check this box	and stop here. The	e organization qual	ifies as a publicly	supported organiz	ation	▶□
b 33 1/3% support tests - 2009. If the	e organization did	not check a box or	line 14 or line 19	a, and line 16 is mo	ore than 33 1/3%,	and
line 18 is not more than 33 1/3%, cl						
20 Private foundation. If the organizat	ion did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	▶□

Schedule A (Form 990' or 990-EZ) 2010 BELLEVUE SCHOOLS FOUNDATION	91-1080997	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II,	line 10; Part II, line 17a	
and Part III, line 12. Also complete this part for any additional information. (See instructions).		
SCHEDULE A, PART II:		
THE THE PROVIDE THAT WE VENDE DIGITALED IN COLUMN A R OF DARM II		
THE IRS REQUIRES THAT THE YEARS DISPLAYED IN COLUMNS A - E OF PART II		
REFLECT SHORT YEAR RETURNS THAT WERE FILED. THE CORRECT YEARS FOR DISPLAY		
NOT DECIT THE REPORT OF THE PARTY OF THE PAR		
ARE: COLUMN A - 2007; COLUMN B - 2008; COLUMN C - 2009; COLUMN D - 2010;		
COLUMN E - SHORT YEAR 2010.		
		<u>-</u>
SCHEDULE A, PART II, LINE 10: EXPLANATION OF OTHER INCOME		
COLUMN A WEGGET ANDOUG		
COLUMN A - MISCELLANEOUS		
COLUMN D - GRANT MANAGEMENT FEE		
CONDIAN D CART MARIONINA 122		-
		
	· · · · · · · · · · · · · · · · · · ·	
		
	<u> </u>	
		
		·

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

➤ Attach to Form 990. ➤ See separate instructions.

2010
Open to Public Inspection

Name of the organization

BELLEVUE SCHOOLS FOUNDATION

Employer identification number 91-1080997

Par			or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	.,	
	Aggregate contributions to (during year)		
	Aggregate contributions to (during year) Aggregate grants from (during year)		
	Aggregate value at end of year	werting that the access hold in donor activis	and funds
	Did the organization inform all donors and donor advisors in		Yes No
	are the organization's property, subject to the organization's		· ·
	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
	impermissible private benefit?		Yes No
Par			Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e		stoncally important land area
	Protection of natural habitat	Preservation of a cert	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
ь	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pel	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements in		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	luring the year
	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?	, ,	Yes No
9	In Part XIV, describe how the organization reports conservat	 ion easements in its revenue and expense	e statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organiza		
	conservation easements.		
Par	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
	if the organization elected, as permitted under SFAS 116 (AS		ment and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		, , , , , , , , , , , , , , , , , , ,
L	If the organization elected, as permitted under SFAS 116 (AS		t and halance sheet works of art, historical
U	treasures, or other similar assets held for public exhibition, e		
		ducation, of research in fartherance of pa	blic service, provide the following amounts
	relating to these items.		~ ¢
	(i) Revenues included in Form 990, Part VIII, line 1		
_	(ii) Assets included in Form 990, Part X		•
2	If the organization received or held works of art, historical tre		ai gain, provide
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	. .
			• \$
b	Assets included in Form 990. Part X		▶ \$

		HOOLS FOUNDATIO				L-10809		Page 2
Par	t III Organizations Maintaining C	ollections of Ar	t, Historical Tr	easures, or Oth	er Simila	r Asset	s (conti	nued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	significant us	se of its o	collection	rtems
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
b	Scholarly research	е	Other					
С	Preservation for future generations			-				
4	Provide a description of the organization's co	ollections and explain	n how they further t	he organization's ex	empt purpos	e in Part	XIV.	
5	During the year, did the organization solicit o		-	-				
_	to be sold to raise funds rather than to be ma						Yes	☐ No
Par	t IV Escrow and Custodial Arran				Form 990 I	Part IV li		
	reported an amount on Form 990, Par		or and organization	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o i oiiii ooo, i	C. C. T. T.	110 0, 01	
	Is the organization an agent, trustee, custodi		liary for contribution	s or other assets no	t included			
	on Form 990, Part X?		mary for continuation	io or other abouto ne	i iiiolaaca		Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table:	•	•		163	LLLI NO
U	ir res, explain the arrangement in rait XIV	and complete the lo	nowing table.		F T		Amount	
	Paginning balance				10		Amount	
ت د	Beginning balance		• •		1c			
d	Additions during the year	-		•	1d			
e	Distributions during the year				1e			
1	Ending balance		040		1f		1.4	
2a	Did the organization include an amount on Fo		217	•		L.	Yes	∟ No
Par	If "Yes," explain the arrangement in Part XIV. t V Endowment Funds. Complete in		owered "Vee" to Ee		10			
rai	Lildowine it i dids. Complete			_		ro book	4) Faur	bask
		(a) Current year 479,614.	(b) Prior year	(c) Two years back	(d) Three yea	irs back		years back
1a	Beginning of year balance	4/3,614.	341,321.	308,531.	, ,	~ '	* 1,	
b	Contributions	15 126	81,060.	24-026				<u> </u>
C	Net investment earnings, gains, and losses	-15,126.	57,947.	34,936.	- 2 "en"	· · · ·		•
d	Grants or scholarships	12,401.		1,500.	<u> </u>			
е	Other expenditures for facilities				;	. [•	
	and programs		54.4		, h			
f	Administrative expenses	6.	714.	646.	4 1,			
g	End of year balance	452,081.	479,614.	341,321.	· .			<u>, , , , , , , , , , , , , , , , , , , </u>
2	Provide the estimated percentage of the year							
а	Board designated or quasi-endowment	.00	_%					
b	Permanent endowment ► 100.00	%						
С		%						
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that are held a	nd administered for	the organizat	tion	_	
	by:						$\overline{}$	res No
	(i) unrelated organizations					•	3a(i)	x
	(ii) related organizations					•	3a(ii)	х
b	If "Yes" to 3a(ii), are the related organizations						3b	
4	Describe in Part XIV the intended uses of the							
Par	t VI Land, Buildings, and Equipm							
	Description of investment	(a) Cost or ot		I	ccumulated	- 1 ((d) Book	value
		basis (investm	nent) basis ((other) de	preciation			
1a	Land				·			
b	Buildings							
С	Leasehold improvements .							
d	Equipment			37,605.	34,57	16.		3,029.
е	Other							
T-4-1	Add lines to through to (Column (d) must a	gual Form 990 Part	Y column (R) line 1	0(c))		_		3 020

(in) Francac deviating name of security) (in) Francac deviatives (2) Closely held equity interests (3) Other (4) (5) (6) (7) (6) (7) (8) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	Part VIII Investments - Other Securities.	see Form 990, Part X, line	12		
(2) Closely-held equity interests (3) Cher (4) (9) (9) (9) (9) (9) (9) (9) (10) (10) Description of investment type (10) Book value (11) Cost or end-of-year market value (12) (3) (4) (5) (9) (9) (9) (9) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (19) (19) (19) (19) (19) (19) (19) (19	(a) Description of security or category (including name of security)	(b) Book value	(
(3) Other (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(1) Financial derivatives				
(A) (B) (C) (C) (C) (D) (E) (F) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (H) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(2) Closely-held equity interests				
(S) (C) (C) (D) (E) (F) (F) (G) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (E) (F) (D) (F) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E	(3) Other				
(C) (D) (C) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(A)	·			
(C) (E) (F) (P) (P) (P) (P) (P) (P) (P) (P) (P) (P	(B)				
(E) (F) (C) (C) (F) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(C)		<u> </u>		
(F) (G) (B) (P) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(D)				
(G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(E)				
(+) (0) Total. (Col (b) must equal Form 990, Part X, col (B) ine 12.) ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13.	(F)				. <u> </u>
(a) Description of investment type (b) Book value (c) Method of valuation: (a) Description of investment type (b) Book value (c) Method of valuation: (c) Method of valuation: (cost or end-of-year market value (b) Book value (cost or end-of-year market value (cost or end-of-year market value (d) Book value (d) Book value (d) Book value (d) Book value (d) Book value (e) Book value (f) Cost or end-of-year market value (g) Book value (h) Book	(G)				
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)	(H)				
Part VIII Investments - Program Related. See Form 990, Part X, line 13.					
(a) Description of investment type (b) Book value (c) Method of valuation: Cost or end-of-year market value (f) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year market value (g) Cost or end-of-year en					And the second
(a) Description of investment type (b) Sook value (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	Part VIII Investments - Program Related.	See Form 990, Part X, line	13.		
(2) (3) (4) (5) (6) (7) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (β) line 13.) ▶ Part IX Other Assets, See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (β) line 15.) ▶ Part X Other Labilities, See Form 990, Part X, line 25. 1. (a) Description of liability (b) Amount (1) Federal income taxes (2) (3) (4) (6) (6) (7) (8) (9) (10) (10) (11) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶ Total. (Column (b) must equal Form 990, Part X, col (β) line 25.) ▶	(a) Description of investment type	(b) Book value	(
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Sche	dule D (Form 990) 2010 . BELLEVUE SCHOOLS FOUNDATION		91-1080997	Page 4
_	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finan	cial S	tatements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		
4	Net unrealized gains (losses) on investments	4	· · · · · · · · · · · · · · · · · · ·	
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net). Add lines 4 through 8	9		
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		
10 Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue		er Return	
1	Total revenue, gains, and other support per audited financial statements		11	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	Net unrealized gains on investments 2a			
a	Donated services and use of facilities 2b			
b	Recoveries of prior year grants 2c		 	
ب د	Other (Describe in Part XIV.)		 	
d	Add lines 2a through 2d			
e	Subtract line 2e from line 1		3	
3	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
4	↓ ↓		3.	
a			 :	
b	Other (Describe in Part XIV) Add lines 4a and 4b		4c	
C	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	•	5	
I Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nses		
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	• •	· ·	
a	Donated services and use of facilities 2a		`	
b	Prior year adjustments 2b		 1.	
	Other losses 2c			
d	Other (Describe in Part XIV.)			
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	-
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b		1.1	
	Other (Describe in Part XIV)			
	Add lines 4a and 4b		4c	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	
Pa	rt XIV Supplemental Information			
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	ırt IV, lır	nes 1b and 2b; Part V, Iir	ne 4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to pro			
	V, LINE 3A(I): ENDOWMENT FUNDS OF \$46,547, WHICH ARE USED FOR AWARDS			
TO I	NCOURAGE COMMUNITY SERVICE, ARE HELD AND ADMINISTERED BY AN UNRELATED			
ORG	NIZATION, THE SEATTLE FOUNDATION.			
PAR	V, LINE 4: INCOME FROM THESE FUNDS IS RESTRICTED TO SUPPORT COMMUNITY			
SER	VICE AND MUSIC PROGRAMS AS STIPULATED BY THE RELATED GIFT INSTRUMENTS.			

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service

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

2010 Open to Public Inspection

JMB No 1545-0047

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

▶ Attach to Form 990.

Schedule I (Form 990) (2010) Employer identification number HIGHLY CAPABLE STUDENT (h) Purpose of grant 91-1080997 or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any SLEF PROGRAM VIBES GRANT STEM GRANT SRANT recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part il can be duplicated if additional space is needed address of organization

(d) Amount of organization (book, if applicable cash grant assistance other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ٥. ö 。 ٠. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. 000 23,234 6,891 12,267 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. GOVERNMENT GOVERNMENT GOVERNMENT GOVERNMENT Enter total number of section 501(c)(3) and government organizations BELLEVUE SCHOOLS FOUNDATION 91-6001637 91-6001637 91-6001637 91-6001637 General Information on Grants and Assistance criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization BELLEVUE SCHOOL DISTRICT BELLEVUE SCHOOL DISTRICT BELLEVUE SCHOOL DISTRICT BELLEVUE SCHOOL DISTRICT BELLEVUE, WA 98009-9010 BELLEVUE, WA 98009-9010 BELLEVUE, WA 98009-9010 BELLEVUE, WA 98009-9010 POST OFFICE BOX 90010 POST OFFICE BOX 90010 POST OFFICE BOX 90010 POST OFFICE BOX 90010 Name of the organization Part I

Schedule I (Form 990) (2010) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Schedule | (Form 990) (2010) BELLEVUE SCHOOLS POUNDATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (d) Amount of non-cash assistance (c) Amount of cash grant SCHEDULE I, PART I, LINE 2: ALL GRANTEES ARE ASKED TO PROVIDE AN EVALUATION OF THEIR GRANT, SOMETIMES PERIODICALLY, SOMETIMES YEARLY, AND ALWAYS AT THE (b) Number of recipients (a) Type of grant or assistance END OF THE GRANT. 032102 01-13-11 Part IV

Page 2

91-1080997

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2010
Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization BELLEVUE SCHOOLS FOUNDATION 91-1080997 FORM 990 PART I LINE 1 DESCRIPTION OF ORGANIZATION MISSION: ALL STUDENTS OF THE BELLEVUE SCHOOL DISTRICT. FORM 990, PART I, LINE 6: VOLUNTEERS HELP AT OUR SPRING FOR SCHOOLS, PHONATHON AND MANY OTHER EVENTS THROUGHOUT THE YEAR. THE NUMBER OF VOLUNTEERS ALSO INCLUDES UNCOMPENSATED BOARD MEMBERS FORM 990 PART III LINE 1 DESCRIPTION OF ORGANIZATION MISSION: PROGRAMS THAT MEET STUDENTS' SPECIAL NEEDS. WE ALSO HELP BRIDGE THE GAP BETWEEN THE BASIC FUNDING PROVIDED BY THE STATE OF WASHINGTON AND WHAT THE BELLEVUE SCHOOL DISTRICT'S STUDENTS NEED TO TRULY EXCEL. FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: DEVELOPMENT FOR STAFF, MENTOR OUTREACH AND COORDINATION. NEW CURRICULUM SUPPORT AND SUPPORT FOR STRUGGLING STUDENTS. PROJECT-BASED LEARNING CURRICULUM DEVELOPMENT IN HIGH SCHOOL ADVANCED PLACEMENT COURSEWORK - MULTI-YEAR GRANT FUNDED BY THE GEORGE LUCAS EDUCATIONAL FOUNDATION, PROJECT DEVELOPS CURRICULUM, IMPLEMENTS CLASSES AND PROVIDES RESEARCH FOR PROJECT-BASED LEARNING IN HIGH SCHOOL ADVANCED PLACEMENT (AP) COURSE WORK. THIS YEAR, THE PROJECT FOCUSED ON A NEW PROJECT-BASED LEARNING AP ENVIRONMENTAL SCIENCE COURSE. BELLEVUE TEACHERS COLLABORATED WITH UNIVERSITY OF WASHINGTON RESEARCHERS TO

Schedule O (Form 990 or 990-EZ) (2	.010)	Page 2
Name of the organization	UE SCHOOLS FOUNDATION	Employer identification number 91-1080997
STRONG FUNCTIONAL WORKING	CNOWLEDGE.	
HIGHLY CAPABLE - PROVIDES	PROFESSIONAL DEVELOPMENT TO IMPROVE CLASSROOM	
LITERACY INSTRUCTION FOR H	GHLY CAPABLE STUDENTS,	
FORM 990, PART III, LINE 4	PROGRAM SERVICE ACCOMPLISHMENTS:	
TECHNOLOGY ENGINEERING MAT	H (STEM) MENTORS, LEGACY LEADERSHIP MENTORS	
TO SUPPORT MIDDLE SCHOOL Y	OUTH OF COLOR, AND COLLEGE CORPS MENTORS TO	
SUPPORT STUDENTS APPLYING	ro college.	
		
FORM 990, PART VI, SECTION	B, LINE 11: THE FINANCE COMMITTEE INSPECTS TH	IE .
CURRENT YEAR FORM 990 AND	PROVIDES A FULL COPY TO THE BOARD PRIOR TO THE	
RETURN BEING FILED.		
		· · · · · · · · · · · · · · · · · · ·
FORM 990, PART VI, SECTION	B, LINE 12C: THE BOARD OF THE BELLEVUE SCHOOL	s
FOUNDATION HAS FORMALLY AD	OPTED A CONFLICT OF INTEREST POLICY. EACH BOA	RD
MEMBER IS PROVIDED THE CON	PLICT OF INTEREST POLICY AND A CONFLICT OF	
INTEREST FORM FOR COMPLETI	ON AND SUBMISSION. FOLLOW-UP IS CONDUCTED BY	Α
FOUNDATION BOARD MEMBER OR	STAFF TO ENSURE THAT THEY ARE ALL RETURNED.	THE
BOARD PRESIDENT AND/OR EXE	CUTIVE DIRECTOR REVIEWS THE CONFLICT OF INTERE	ST
FORMS AND REVIEWS BOARD ME	MBER INVOLVEMENT FOR ANY POTENTIAL AREAS	
REQUIRING A CONFLICT OF IN	TEREST DISCLOSURE OR ACTION. IN THE EVENT THA	т А
CONFLICT OF INTEREST DID A	RISE, THE BOARD WOULD TAKE APPROPRIATE ACTION	то
REMEDY THE SITUATION.		
		·····
FORM 990, PART VI, SECTION	B, LINE 15A: BELLEVUE SCHOOLS FOUNDATION	
SUBSCRIBED TO UNITED WAY'S	NON-PROFIT SALARY SURVEY TO ASSIST IN	
032212	PAYROLL BUDGET AND TO IDENTIFY WHERE THEY MAY	Schedule O (Form 990 or 990-EZ) (2010)
01-24-11		

Schedule O (Form 990 or 990-EZ) (2010)	Page 2
Name of the organization BELLEVUE SCHOOLS FOUNDATION	Employer identification number 91-1080997
HAVE COMPETITIVE ISSUES WITH THE POSITIONS RELATIVE TO THOSE REPORTED IN	
THE SURVEY. THE HUMAN RESOURCES COMMITTEE ANALYZED THE SURVEY AND PASSED	
RECOMMENDATIONS ON BUDGET AND INDIVIDUAL ISSUES TO THE EXECUTIVE DIRECTOR	
FOR DISCUSSION WITH THE EXECUTIVE COMMITTEE. THE PAYROLL BUDGET WAS THEN	
APPROVED BY THE BOARD. THE EXECUTIVE COMMITTEE PARTICIPATED IN THE	
INDIVIDUAL COMPENSATION/BENEFITS DECISIONS FOR THE EXECUTIVE DIRECTOR AND	
THE EXECUTIVE DIRECTOR DETERMINED THE COMPENSATION FOR ALL OTHER STAFF.	
FORM 990, PART VI, SECTION C, LINE 19: THE ANNUAL REPORT, GOVERNING	
DOCUMENTS, CONFLICT OF INTEREST POLICY, AND TAX RETURN ARE AVAILABLE BY	
REQUEST.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	,
NET UNREALIZED LOSSES ON INVESTMENTS: -17,707.	
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Part VII Section A. Officers, Directors, Truste (A) Name and title AUREL PRESTON COARD MEMBER UITH RASKIND COARD MEMBER COXANNE SHEPHERD EXECUTIVE DIRECTOR TANICE LEITZKE TINANCE AND OPERATIONS MGR.	(B) Average hours per week		1	(C Posi	tion hat			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
AUREL PRESTON OARD MEMBER UTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	hours per week		neck			app	ly)	compensation from	compensation from related	amount of
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	per week			all t	hat		ly)	from	from related	
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	week	Individual trustae or director	titutional trustee			ıployee				other
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE		Individual trustae or director	titutional trustee			ployee		the I		
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	Individual trustae or directo	titutional trustee			횰			organizations	compensation
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	Individual trustae or di	titutional trustee			E		organization	(W-2/1099-MISC)	from the
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	Individual trustae	titutional truste			ated		(W-2/1099-MISC)		organization and related
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	Individual tre	titutional			beus				
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	Individ	暑し		god	ш03			1	organizations
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	트	Ś	Officer	Кеу етріоуве	ghes	Former			
OARD MEMBER OUTH RASKIND OARD MEMBER OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	1 00	1	드	$\stackrel{\circ}{-}$	ž	Ξ	<u></u>			
COARD MEMBER COXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE	-,	x						0.	0.	o
OXANNE SHEPHERD EXECUTIVE DIRECTOR FANICE LEITZKE		П								
EXECUTIVE DIRECTOR ANICE LEITZKE	1.00	х						0.	0.	0
ANICE LEITZKE										
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Fotal to Part VII, Section A, line 1c	·	_			Щ.				······································	