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# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

Department of the Treasury

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

Open to Public

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<u>A</u>	For the 2	2011 cale	ndar year, or tax year beginr			nd ending			, 20		
В	Check if a	pplicable	C Name of organization Milwau	kee Public Schools Founda	ation, Inc.			D Employ	er identification	number	
	Address c	hange	Doing Business As					39 1929112			
	Name cha	inge	Number and street (or P O box	if mail is not delivered to street a	address)	Room/suite		E Telephor	ne number		
<b>7</b>	Initial retur	rn	5225 W. Vliet Street (P O. Bo	x 2181)		20	00		414-475-8650		
	Terminate	d	City or town, state or country, a	nd ZIP + 4	<u> </u>						
	Amended	return	Milwaukee, WI 53208-2648					<b>G</b> Gross re	eceipts \$		
ī	Application		i .	officer			H(a) is this s		for affiliates?    Ye	s V No	
_	, (pp.,out.o.	n ponding	Gerald Pace, 5225 W Viet S				1		ncluded? Ye	_	
_	Tax-exem	nt status	501(c)(3) 501		947(a)(1) or [	527			list (see instruct		
<u>'</u>	Website:		w.mpsfoundation.net	(c)( ) = (mserrio)4	947(a)(1) or L	52/	-		•	N/A	
K			<del></del>	ociation ☐ Other ▶	T. Vas			_	number ►	WI	
_				ociation	L Yea	r of formatio	1996	M State	of legal domicile	WI	
	art I	Summ									
			escribe the organization's n				<u>-</u>	:			
ĕ	_	To prom	ote educational excellence a	nd strengthen community p	participation	in the Mil	waukee Pu	blic Scho	ols.		
aŭ	-										
Ę	_										
<u>§</u>	2 (	Check th	is box ▶ ☐ if the organizat	on discontinued its opera	ations or dis	sposed of	more than	25% of	its net assets		
<u>ن</u>	3	Number	of voting members of the g	overning body (Part VI, Iir	ne 1a)			3		10	
Se	4 1	Number	of independent voting mem	bers of the governing bo	dy (Part VI,	line 1b)		4		9	
ŧ	5 7	Fotal nur	nber of individuals employe	ed in calendar year 2011 (	Part V, line	2a)	•	5		0	
Activities & Governance	6 1	Total nur	nber of volunteers (estimate	e if necessary)				6		5	
⋖	7a 1	Total unr	elated business revenue fro	om Part VIII, column (C), li	ne 12 .			7a		0	
			lated business taxable inco					7b		0	
							Prior Ye	ar	Current '	Year	
	8 (	Contribu	tions and grants (Part VIII, I	ine 1h) .		–		203,218		885,566	
ž	1		service revenue (Part VIII, I			`	_	0		0	
Revenue	1	_	ent income (Part VIII, colum	•		-		9,282		(-6,160)	
			venue (Part VIII, column (A),		200 110	-		- 0,202		(-0,100)	
			enue—add lines 8 through 1			, <sub>2 12</sub>		212,500		879,407	
			nd similar amounts paid (Pa			10 12)					
						·		191,171		331,075	
	1 4 - 4		paid to or for members (Pa			· ⊢		0		0	
Expenses	15 9		other compensation, employ			o-10)		0			
ë	16a F		onal fundraising fees (Part I		}][· · ][·	· ·		0		0	
×	b ]		draising expenses (Part IX,								
ш	17		penses (Part IX, column (A)	·		· ·  _		22,317		15,739	
	1	-	penses Add lines 13-17 (m		(A), line 25)	)		213,488		346,813	
		Revenue	less expenses. Subtract lir	ne 18 from line 12	•			(988)		532,594	
Net Assets or Fund Balances						Be	ginning of Cu	irrent Year	End of Y		
Sets	20 7	Fotal ass	sets (Part X, line 16) .					538,577		1,177,829	
A P	21 7	Total liab	oilities (Part X, line 26) .					0		0	
ž	22 1	Net asse	ts or fund balances. Subtra	ct line 21 from line 20	<u> </u>			538,577		1,177,829	
P	art II	Signa	ture Block								
Ur	der penalti	es of perju	iry, I declare that I have examined	this return, including accompany	ing schedules	and statem	ents, and to t	he best of r	ny knowledge ar	nd belief, it is	
tru	e, correct,	and comp	te Declaration of preparer tother	than officer) is based on all infor	mation of whic	ch preparer h	as any knowl	edge	<i>i</i> /		
		1	Tuald	one				51	3/2012		
Sig	gn	<b>9</b> /gn	ature of officer				Da	ite 7	1		
He	re	\G	erald Pare								
		Type	or print name and title				<del> </del>				
_	• •		pe preparer's name	Preparer's signature		Date	<del></del>	1	PTIN		
Pa		'	•					Check self-emp	ıf		
	eparer						1_	_1		-	
Us	se Only							n's EIN ▶			
NA-	v the IDS		s this return with the propa	ror chown about? /ccc :-:	otruotiono\		Pho	пе по			
_	<del></del>		s this return with the prepa		structions)	· · _	• • • •			es No	
For	Paperwo	ork Redu	ction Act Notice, see the ser	parate instructions.		Cat No	11282Y		Form	<b>990</b> (2011)	





orm 991	) (2011)			Page Z
art		Statement of Program Service Accomplishments		
		Check if Schedule O contains a response to any question in this Part III	<u> </u>	🗀
1		describe the organization's mission		
	To pro	omote educational excellence and strengthen community participation in the Milwaukee Public Schools.		
	Did th	e organization undertake any significant program services during the year which were not listed on the		<del></del>
2		Form 990 or 990-EZ?	□Yes	[7] No
	•	s," describe these new services on Schedule O	□ res	[▼] I4O
3		ne organization cease conducting, or make significant changes in how it conducts, any program		
•	servic	· · · · · · · · · · · · · · · · · · ·	☐Yes	☑ No
		s," describe these changes on Schedule O.	_ 103	٠,٠٥
4		the the organization's program service accomplishments for each of its three largest program services,	as meas	sured by
		ises. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to repoi		
		s and allocations to others, the total expenses, and revenue, if any, for each program service reported.		
	_			
4a	(Code	: ) (Expenses \$ 106,658 41 including grants of \$ 106,658.41 ) (Revenue \$		)
		lichael and Helen Jupka Fund was established to provide scholarship support for graduating seniors at Milwau	ikee Publ	ic
		ols Bradley Trade and Technical High School who are attending college. The scholarship dollars were invested		
	Great	er Milwaukee Foundation, but remain under the control of the MPS Foundation.		
4b	(Code			)
		IPS Scholarship Program was established through a generous anonymous donation to the MPS Foundation to		the
	schol	arship program as a show of support for public education in Milwaukee and the State of Wisconsin – In the firs	t year	
	(June	, 2010), five \$5,000 scholarships were awarded. In the second year (2011), eight \$5,000 scholarships were awa	rded,	
		were scholarship renewals and five were new recipients. These scholarships are for high school students enr		
		ukee Public Schools to attend a public college or university in the State of Wisconsin. The scholarships may	be renev	ved for
	up to	three years pending successful completion of renewal criteria and availability of funding		
4c	(Code	e: ) (Expenses \$ 30,000 including grants of \$ 30,000 ) (Revenue \$		<u> </u>
70	The M	MPS Recreation Department received a grant, through the MPS Foundation, from the United States Olympic Co.	mmittee	/ This
		was designed to provide recreational services to veterans with physical disabilities.		
	9.4	1120 203(3) 22 20 30 30 30 30 30 30 30 30 30 30 30 30 30		
4d	Other	program services (Describe in Schedule O )	•	
		enses \$ 134,176.39 including grants of \$ 134,176.39 ) (Revenue \$ )		
4e		program service expenses ▶		

Part	V Checklist of Required Schedules	_		
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		<b>√</b>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		<b>√</b>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		1
6	Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which 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	5 6	1	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7	•	1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<b>√</b>
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		<b>✓</b>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		***	, X.
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		1
b	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		1
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		✓
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
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		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		✓
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		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<b>√</b>
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		/
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		<b>√</b>
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
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		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		<b>√</b>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	25		
	through 24d and complete Schedule K. If "No," go to line 25	24a		<b>√</b>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		1
Ч	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		1
25a		25a		1
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		<b>✓</b>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
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		1
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		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
b	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	35b		1
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		1
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? <i>If "Yes," complete Schedule R</i> ,			
00	Part VI	37		<b>✓</b>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	<b>√</b>	(2011)
		E ~	~ 441	(0011

art	<b>-</b> · · · · · · · · · · · · · · · · · · ·			_
	Check if Schedule O contains a response to any question in this Part V	· ·	Yes .	No.
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable .   1a   0		163	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	1		
	reportable gaming (gambling) winnings to prize winners?	1c	1	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0	j		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) .			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year? .	3a		<b>✓</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<b>✓</b>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4-		1
ь	If "Yes," enter the name of the foreign country. ▶	<u>4a</u>		· <b>-</b>
U	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		<b>✓</b>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible?	6a		<b>✓</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		1
7	Organizations that may receive deductible contributions under section 170(c).	OD		V
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		1
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ĺ .
	required to file Form 8282?	7c		<b>✓</b>
d e	If "Yes," indicate the number of Forms 8282 filed during the year			,
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e 7f		<b>✓</b>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		7
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		1
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	- 1	_	
_	organization, have excess business holdings at any time during the year?	8		✓
9_	Sponsoring organizations maintaining donor advised funds.			,
a b	Did the organization make any taxable distributions under section 4966?  Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		1
10	Section 501(c)(7) organizations. Enter:	90		<b>├</b>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b 0			
11	Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
þ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	against amounts due or received from them.)	12a		1
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year .   12b	120		<b>  •</b>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		1
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	About a company of the company has been a complete of the other of the company of			
_	the organization is licensed to issue qualified health plans			
C 14a	Enter the amount of reserves on hand	14a		
14a b	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14h		<b>✓</b>

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and		"No"
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S			
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>		. 🔲
Secti	on A. Governing Body and Management			
4.	Enter the number of value months of the covering had at the end of the toy year.		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 12  If there are material differences in voting rights among members of the governing body, or	1		1
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 11	]		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5 6		<del>                                     </del>
6 7a	Did the organization have members or stockholders?	-		<del>  •</del>
	one or more members of the governing body?	7a		<b>/</b>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b		✓
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	1	
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	<del>,</del>	
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No /
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	IUa		+
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			Π.
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		<b>✓</b>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		1
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done.	120		
13	Did the organization have a written whistleblower policy?	12c		1
14	Did the organization have a written document retention and destruction policy?	14		<b>V</b>
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		1
b	Other officers or key employees of the organization	15b		✓
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	-	1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u> </u>	organization's exempt status with respect to such arrangements?	16b	L	<u>√</u>
	on C. Disclosure  List the states with which a copy of this Form 990 is required to be filed ▶ Wisconsin			
17 18	List the states with which a copy of this Form 990 is required to be filed <b>Wisconsin</b> Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply	n 501	(c)(3)s	only
19	Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	of inte	rest p	oolicy
20	State the name, physical address, and telephone number of the person who possesses the books and records	of the	•	

Form 990 (2011)	

Page 7

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

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

Check this box if neither the organization no	r any relate	d org	anız			ompe	nsa	ted any currer	t officer, director	r, or trustee
				(0	C)					
(A)	(B)	/do n	ot of		ition	e than c		(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per week				irect	or/trust		compensation from	compensation from related	amount of other
	(describe	Individual trustee or director	Inst	Officer	₩ 9	emg	Former	the	organizations	compensation
	hours for related	l red	Ē	ള	Key employee	nest Joyce	ner	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the
	organizations	o al	onal		탕	e con		(10-2/1033-101130)		organization and related
	in Schedule O)	uste	Institutional trustee		ee e	per				organizations
	0,	&	stee			Highest compensated employee				
					-	-				
(1) Gregory E. Thornton										
Registered Agent	0	✓								
(2) Denise Callaway										-
Executive Director	2.3	1						<u> </u>		
(3) Gerald Pace										
Treasurer	0	1	İ							
(4) Tina Just										
Administrative Support Specialist	.42								1	
(5) Felecia Jasper-Mitchell										
Accountant	1.5									
(6) Paul Stawickı										
Accounting Specialist	.58									
(7)										
							_			
(8)		ļ								
(9)						-			_	
	1									
(10)										
(11)	<u> </u>			L	_		_			
1.17	-									
(12)	<u> </u>								-	
<del></del>		<u> </u>					_			
(13)										
(14)	<del> </del>		_		-		-			
(1-7)	1		1	Ì			l	1		

Part	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighes	st C	ompensated E	mployees (c	ontinue	ed)		
	(A) Name and title	(B) Average	Average box, unless person is both an Reportable Reporta						(E) Reportable	(F) ble Estimated			•	
		hours per week (describe hours for related organizations in Schedule O)	of directo				Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation related organizatior (W-2/1099-MI	ıs	of compe from organ and	unt of ther ensation in the nization related izations	
(15)													_	
(16)														
(17)														
(18)													-	
(19)														
(20)														
(21)				_										
(22)														
(23)														-
(24)													_	
(25)														
1b c d	Sub-total  Total from continuation sheets to Part  Total (add lines 1b and 1c)	VII, Sectio					•	<b>&gt; &gt; &gt;</b>	0					
2	Total number of individuals (including but reportable compensation from the organi	not limited	to th			ed a	above	e) w	ho received me	ore than \$10	0,000	of		
3	Did the organization list any former of			r tr	uste	e.	kev e	emp	lovee, or high	est comper	sated		Yes	No
4	employee on line 1a? If "Yes," complete 8 For any individual listed on line 1a, is the	Schedule J	for su	ıch	ındı	vidu	ıal					3		✓
	organization and related organizations individual	greater that	an \$1	50,	000	? #	"Ye	s,"	complete Sch	edule J for	such	4		<b>√</b>
5	Did any person listed on line 1a receive of for services rendered to the organization?										vidual 	5		<b>√</b>
Section	on B. Independent Contractors								<u> </u>			1 -		•
1	Complete this table for your five highest compensation from the organization. Repyear.	compensation compe	ed inc nsatio	depe	end or th	ent i	contr alend	acto ar y	ors that receive rear ending wit	ed more thar h or within th	1 \$100, he orga	000 of anizatio	on's ta	ax
	(A) Name and business add	ress							(B) Description of s	ervices	C	(C) Compens	ation	
									_					
2	Total number of independent contractor							th	ose listed abo	ove) who			_	-

Part	VIII	Statement of Revenue			
			ex fur	(B) (C) ated or Unrelated tempt business notion revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1a	Federated campaigns 1a 0			
irar	b	Membership dues 1b 0	}		
s, G	С	Fundraising events 1c 0			
ar.	d	Related organizations 1d 0			
imil	е	Government grants (contributions) 1e 0			
ion	f	All other contributions, gifts, grants,	1		
the the		and similar amounts not included above 1f 885,566			
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions included in lines 1a-1f \$ 0			
Co	h	<b>Total.</b> Add lines 1a–1f ▶	885,566		
Program Service Revenue		Business Code		_	
ver	2a				
8	b				"
Nic.	C				
Ser	d				
æ	e				
ogr	f	All other program service revenue			
ځ	g	<b>Total.</b> Add lines 2a–2f ▶			
	3	Investment income (including dividends, interest,			
		and other similar amounts) ▶	(-6,160)		
	4	Income from investment of tax-exempt bond proceeds ►	0		
	5	Royalties	0		
		(i) Real (ii) Personal			
	6a	Gross rents .			
	b	Less: rental expenses	†		
	C .	Rental income or (loss)		-	
	d	Net rental income or (loss)			
	7a	Gross amount from sales of (i) Securities (ii) Other			,
	L.	assets other than inventory			
	b	Less. cost or other basis and sales expenses .			
	С	Gain or (loss) .	1		
	d	Net gain or (loss)			=
Φ.	_				
Revenue	8a	Gross income from fundraising			
e e		events (not including \$			
		of contributions reported on line 1c). See Part IV, line 18 a			
Other					,
ō		Less. direct expenses <b>b</b> Net income or (loss) from fundraising events . <b>&gt;</b>			
		Net income or (loss) from fundraising events .   Gross income from gaming activities.	-		
	56	See Part IV, line 19 a			
	ь	Less: direct expenses b			
		Net income or (loss) from gaming activities ▶		-	_
		Gross sales of inventory, less			
		returns and allowances a			
	ь	Less: cost of goods sold . b			
		Net income or (loss) from sales of inventory ▶			
		Miscellaneous Revenue Business Code	<del></del>		
	11a				
	b		···		
	С		<del></del>		
	d	All other revenue	-		
	е	Total. Add lines 11a–11d . ▶			
	12	Total revenue. See instructions ▶	879,407		

#### 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).

	Check if Schedule O contains a respon-	se to any question	in this Part IX		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	331,075	331,075	gonolai oxponisos	expenses
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	331,073	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0	0		
<b>4</b> 5	Benefits paid to or for members	0	0	0	0
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7 8	Other salaries and wages  Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0	0	0
9 10 11	Other employee benefits	0	0	0	0
a b	Management	5.500		5.500	
c d e	Accounting	5,500 0 0	0	5,500	0
f g 12	Investment management fees  Other  Advertising and promotion	0 3,638	0	3,638	0
13 14	Office expenses				
15 16 17 18	Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest				
21 22 23	Payments to affiliates  Depreciation, depletion, and amortization Insurance				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a b	Bank Fees State Filing Fees	17 10		17 10	
c d e	Insurance (liability)  Management Fees	3,303 3,271		3,303 3,271	
25 26	Total functional expenses. Add lines 1 through 24e  Joint costs. Complete this line only if the	346,813	331,075	15,739	
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Fa	rt X	Balance Sheet	,,,		4=-
			(A) Beginning of year		( <b>B)</b> End of year
	1	Cash-non-interest-bearing	492,968	1	687,930
Ì	2	Savings and temporary cash investments	45,609	2	489,899
Ī	3	Pledges and grants receivable, net		3	
ŀ	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
ts	6	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)		6	
Assets	7	Notes and loans receivable, net		7	
¥۱	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less. accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	,	11	
	12	Investments – other securities. See Part IV, line 11		12	
- 1	13	Investments - program-related See Part IV, line 11		13	
1	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	538,577	16	1,177,829
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
- 1:	21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		00	-
ia]	23	·		22	<del></del>
'	23 24	Secured mortgages and notes payable to unrelated third parties  Unsecured notes and loans payable to unrelated third parties  .		23	<del></del>
	2 <del>4</del> 25	Unsecured notes and loans payable to unrelated third parties  Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X		24	
		-f-O-bdul- D		<u></u>	
1.	26	Total liabilities. Add lines 17 through 25		25	<del>"</del>
-+	20	Organizations that follow SFAS 117, check here ▶ □ and complete		26	
ces		lines 27 through 29, and lines 33 and 34.		.	-
ļā	27	Unrestricted net assets	150,925	27	189,470
B	28	Temporarily restricted net assets	362,652		963,359
Net Assets or Fund Balances	29	Permanently restricted net assets	25,000	29	25,000
Ö	30	- · · · · · · · · · · · · · · · · · · ·		20	
j j	30 31	Capital stock or trust principal, or current funds	_	30	
Sel	31 32	Paid-in or capital surplus, or land, building, or equipment fund		31	<del></del>
et	32 33	Retained earnings, endowment, accumulated income, or other funds.  Total net assets or fund balances	£20 £27	32	4 477 000
Z	33 34	Total net assets or fund balances  Total liabilities and net assets/fund balances	538,577	33	1,177,829
	<del>~</del>	Total natinties and het assets/fully balances	538,577	34	1,177,829 Form <b>990</b> (2011)

	_	_
Dage	1	2

Par	XI Reconciliation of Net Assets			<u> </u>
	Check if Schedule O contains a response to any question in this Part XI		· <u>·</u>	. 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	1	87	9,407
2	Total expenses (must equal Part IX, column (A), line 25)		34	6,813
3	Revenue less expenses. Subtract line 2 from line 1		53	2,594
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		53	8,577
5	Other changes in net assets or fund balances (explain in Schedule O)		10	6,658
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))		1,17	7,829
Part	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990:  Cash  Other  Other  If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.	<u>ın</u>		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	. 2a	İ	✓
b	Were the organization's financial statements audited by an independent accountant?	. 2b		<b>/</b>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign of the audit, review, or compilation of its financial statements and selection of an independent accountant of the organization changed either its oversight process or selection process during the tax year, explain	? 2c		1
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year we issued on a separate basis, consolidated basis, or both.	re		
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth the Single Audit Act and OMB Circular A-133?	ın 3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits			
		Fo	rm <b>99</b> 0	(2011)

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

## **Public Charity Status and Public Support**

OMB No 1545-0047 2011

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number Milwaukee Public Schools Foundation, Inc. 39 1929112 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II ) An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a ☐ Type! **b** Type II c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes Nο (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? . . . . 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . 11g(iii) Provide the following information about the supported organization(s). (i) Name of supported (II) EIN (III) Type of organization (iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of in col (i) listed in your the organization in organization (described on lines 1-9 organization in col support governing document? col (i) of your (i) organized in the above or IRC section support? (see instructions)) Nο Yes (A) (B) (C) (D) (E)

Page 2 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.)

Secti	on A. Public Support			, p.	<u> </u>	10 / 0.11,	
Calen	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	126,405	158,498	134,800	140,521	158,050	718,274
2	Tax revenues levied for the	120,403	130,430	134,800	140,321	136,030	710,274
_	organization's benefit and either paid				:		
	to or expended on its behalf .	0	0	o	0	ol	0
3	The value of services or facilities			•		<del> </del>	<u> </u>
•	furnished by a governmental unit to the						
	organization without charge	0	0	l ol	0	ol	0
4	Total. Add lines 1 through 3	126,405	158,498	134,800	140,521	158,050	718,274
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						475,344
6	Public support. Subtract line 5 from line 4.					-	242,930
	on B. Total Support				<del></del>		242,930
	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	126,405	158.498	134,800	140,521	158,050	718,274
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar				· ·		
_	sources	1,274	3,868	5,903	9,951	4,057	24,383
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	3,542	(11,597)	7,945	4,542	(10,216)	(5,784)
11	Total support. Add lines 7 through 10	-	, , ,			, , ,	736,873
12	Gross receipts from related activities, etc	(see instruction	ons)			12	
13	First five years. If the Form 990 is for th	e organization	i's first, secon	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop her	re					▶ □
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2011 (line 6		-	1, column (f))		14	33 %
15	Public support percentage from 2010 Sch					15	71 %
16a							
	box and stop here. The organization qual	=		•			
b	331x% support test—2010. If the organ				•		•
	check this box and <b>stop here</b> . The organi	-	, -	• • • • •			_
17a	10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organizate Explain in Part IV how the organization m supported organization	ion meets the eets the "facts	facts-and-ci. a-and-circumst	rcumstances" tances" test Ti	test, check th he organizatio	is box and <b>sto</b> n qualifies as a	and line op here publicly
19							· · ш
18	Private foundation. If the organization distributions						

	le A (Form 990 or 990-EZ) 2011	tions Dee	:L - d :- A -	500/ 1/61		<del></del>	Page
Part							
	(Complete only if you checked th						der Part II.
So o e i	If the organization fails to qualify	under the te	sts listed bei	ow, please co	omplete Part	II.)	
	on A. Public Support	(=) 0007	(+) 0000	(-) 0000	(-1) 0040	( ) 0044	1 (0.7)
Calen 1	dar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
•	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise		<u> </u>			_	-
_	sold or services performed, or facilities furnished in any activity that is related to the						
_	organization's tax-exempt purpose	_	_				
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5.	_					
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		_				
b	Amounts included on lines 2 and 3						
	received from other than disqualified				1		
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6			_			
10a	Gross income from interest, dividends,				1		
	payments received on securities loans, rents, royalties and income from similar sources .						
b	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	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 regularly carried on						
40				1			
12	Other income Do not include gain or loss from the sale of capital assets						
	(Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,		_				
	and 12.)		<u> </u>	<u> </u>		1	<u> </u>
14	First five years. If the Form 990 is for th						on 501(c)(3)
O = = 4:	organization, check this box and stop her				<u> </u>	• • •	▶ [
	on C. Computation of Public Suppor						
15	Public support percentage for 2011 (line 8					15	%
16 Secti	Public support percentage from 2010 Sch on D. Computation of Investment Inc			<u> </u>	<u> </u>	16	%
17	Investment income percentage for 2011 (I			v line 12 selim	mn (fl)	147	
	Investment income percentage for 2011 (Investment income percentage from 2010					17	%
18							9/6

b 33¹⅓% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33¹⅓%, and line 18 is not more than 33¹⅓%, check this box and stop here. The organization qualifies as a publicly supported organization 

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

□

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Pana	Δ

Schedule A (F	Form 990 or 990-EZ) 2011	Page 4
Part IV	<b>Supplemental Information.</b> Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	
Part II, Sec	tion B, # 10. Other income The earnings or losses realized from our Advised Fund; Colonel and Mrs. Ernst F. Liebmann	
Memorial S	Scholarship Fund and Michael and Helen Jupka Memorial Scholarship Fund. The advised fund realized a gain of \$737;	
the Liebm	ann Memorial ScholarshipFund realized a loss of (-\$11,720); and the Jupka Fund realized a loss of (-\$4,233) for 2011	<b></b>
		•••••
		·
	······································	
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#### SCHEDULE D (Form 990)

# **Supplemental Financial Statements**

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name o	f the organization		Employer identification number
Milwau	ikee Public Schools Foundation, Inc		39 1929112
Par	Organizations Maintaining Dono	r Advised Funds or Other Similar Fu	inds or Accounts. Complete if the
	organization answered "Yes" to Fo	orm 990, Part IV, line 6.	·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year .	3	
2	Aggregate contributions to (during year) .	478,016	
3	Aggregate grants from (during year)	20,240	
4	Aggregate value at end of year	489,898	
5	Did the organization inform all donors and		
_	funds are the organization's property, subject	·	
6	Did the organization inform all grantees, dor		
	only for charitable purposes and not for the	benefit of the donor or donor advisor, or	tor any other purpose
Dow	conferring impermissible private benefit?		· · · V Yes No
Pari		lete if the organization answered "Yes	" to Form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g., r	· _	- · · · · · · · · · · · · · · · · · · ·
	Protection of natural habitat	☐ Preservation	of a certified historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization	tion held a qualified conservation contribu	tion in the form of a conservation
	easement on the last day of the tax year		
			Held at the End of the Tax Year
<b>a</b>	Total number of conservation easements .		2a
b	Total acreage restricted by conservation easi		2b
C	Number of conservation easements on a cert	• • • • • • • • • • • • • • • • • • • •	2c
d	Number of conservation easements include		
^	historic structure listed in the National Regist		· · 2d
3	Number of conservation easements modified	i, transferred, released, extinguished, or te	rminated by the organization during the
	tax year ►		
4	Number of states where property subject to a		<u>-</u>
5	Does the organization have a written poli violations, and enforcement of the conservat		- ·
			· · · · · □ Yes □ No
6	Staff and volunteer hours devoted to monitor	ing, inspecting, and enforcing conservation	on easements during the year
7	Amount of our and a manufacture and a		
7	Amount of expenses incurred in monitoring,   > \$	inspecting, and enforcing conservation ea	sements during the year
0	***************************************	line O(d) about action the many	
8	Does each conservation easement reported (i) and section 170(h)(4)(B)(ii)?	• • •	`````
_		• • • • • • • •	· · · · · · L Yes L No
9	In Part XIV, describe how the organization re		
	balance sheet, and include, if applicable, the organization's accounting for conservation ea		inancial statements that describes the
Part			
Part	Complete if the organization area	ctions of Art, Historical Treasures, o	or Other Similar Assets.
		ered "Yes" to Form 990, Part IV, line 8	
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other spublic service, provide, in Part XIV, the text of	if the footnote to its financial statements the	education, or research in furtherance of
b	If the organization elected, as permitted un		
	works of art, historical treasures, or other spublic service, provide the following amounts		education, or research in furtherance of
	•	•	
	(i) Revenues included in Form 990, Part VIII,	iine i	· · · · • \$
•	(ii) Assets included in Form 990, Part X.		
2	If the organization received or held works is		
	following amounts required to be reported ur		nems.
а	Revenues included in Form 990, Part VIII, line		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

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Р	а	n	ρ	2

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Part							
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	ner records, chec	k any of the follow	ving that are a sig	nificant use	of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	rams		
þ	☐ Scholarly research		e 🗌 Other				
C	☐ Preservation for future generations						
4	Provide a description of the organizat XIV	ion's collections a	nd explain how th	ney further the orc	ganization's exemp	t purpose i	n Part
5	During the year, did the organization assets to be sold to raise funds rather					☐ Yes □	ΠNο
Part							
	line 9, or reported an amount						,
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or othe			other assets not	☐ Yes [	
b	b If "Yes," explain the arrangement in Part XIV and complete the following table:						
				4		ount	
C	Beginning balance		• •	10			
d	Additions during the year			10	_		
e	Distributions during the year	•		1e			
f	Ending balance	t on Form 990 Pa		· · · · · <u> </u>		☐ Yes [	No
2a	If "Yes," explain the arrangement in Pa		III A, III 6 2 1 ! .		• •	☐ 169 [	140
Par			ation answered	"Yes" to Form 9	90 Part IV line 1	in .	
ı aı	Endowment i unds. Comple	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four year	s back
1a	Beginning of year balance .	45.609	41,567	34,122	46,219	(-, ,	
b	Contributions	478,016	0	0 0	0		
	Net investment earnings, gains, and	470,010	<del>_</del>				
•	losses	-15,216	4,543	7,945	-11,597		
d	Grants or scholarships	20,240	0	0	0		
e	Other expenditures for facilities and						
	programs		0	o	0		
f	Administrative expenses	3,271	500	500	500		
g	End of year balance	489,898	45,609	41,567	34,122	•	
2	Provide the estimated percentage of the	ne current year en	d balance (line 1g	, column (a)) held	as:		•
а	Board designated or quasi-endowmer		%				
b	Permanent endowment ▶	5 %	<del></del>				
С	Temporarily restricted endowment ▶	95 %					
	The percentages in lines 2a, 2b, and 2	c should equal 10	0%				
3a	Are there endowment funds not in the	possession of the	e organization tha	at are held and ac	lministered for the		
	organization by:						No
	(i) unrelated organizations					3a(i)	1
	(ii) related organizations					3a(ii)	1
b	If "Yes" to 3a(II), are the related organi					3b	
4	Describe in Part XIV the intended uses						
Part		1			<del></del>		
	Description of property	(a) Cost or oth (investme		1 77	Accumulated epreciation	(d) Book valu	16
1a	Land						
b	Buildings						
С	Leasehold improvements						
d	Equipment						
e	Other	,					
Total.	Add lines 1a through 1e (Column (d) n	nust equal Form 99	90, Part X, columr	n (B), line 10(c).)	▶		

Part VII Investments - Other Securitie	s. See Form 990, Part X	, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		<u> </u>
(B) (C)		
(D)		
(E)		
(F)	•	<del></del>
(G)		" " " " " " " " " " " " " " " " " " " "
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12 ) ▶		
Part VIII Investments - Program Relate		X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
<u>(4)</u> (5)	-	
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		<u> </u>
Part IX Other Assets. See Form 990, F		(b) D
(1)	(a) Description	(b) Book value
(1) (2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)	<u> </u>	
(10) <b>Total</b> . (Column (b) must equal Form 990, Part X,	ool (P) line 15 )	
Part X Other Liabilities. See Form 990		
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		╡
(2)		7
(3)		7
(4)		
(5)		
(6)		_
(7)		4
(8)		_
(9) (10)		-
(11)		$\dashv$
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	<del> </del>	$\dashv$
2. FIN 48 (ASC 740) Footnote In Part XIV. provid	e the text of the footnote t	o the organization's financial statements that reports the
organization's liability for uncertain tax positions	under FIN 48 (ASC 740).	3

Schedu	e D (Form 990) 2011		Page <b>4</b>			
Part	XI Reconciliation of Change in Net Assets from Form 990 to A	udited Financial Stateme	ents			
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	<i>.</i>	4			
5	Described assumed as office to	<i>.</i>	5			
6	Investment expenses		6			
7	Prior period adjustments	<u></u>	7			
8	Other (Describe in Part XIV.)		8			
9	Total adjustments (net) Add lines 4 through 8	The second secon	9			
10	Excess or (deficit) for the year per audited financial statements. Combine		10			
Part	XII Reconciliation of Revenue per Audited Financial Stateme					
1	Total revenue, gains, and other support per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b	1 1			
c	Recoveries of prior year grants	2c	1			
d	Other (Describe in Part XIV.)	2d	1			
e	Add lines 2a through 2d		2e			
3	Subtract line 2e from line 1	•	3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV )	4b	1			
c			4c			
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		5			
	XIII Reconciliation of Expenses per Audited Financial Staten					
1			1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.		<del></del>			
<b>-</b> а	Donated services and use of facilities	2a				
b		2b				
C	Other losses	2c				
d	Other (December of Dect VIV.)	2d				
e			2e			
3	Add lines 2a through 2d		3			
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i . i				
	Investment expenses not included on Form 990, Part VIII, line 7b	40				
a	Others (Describer on Dest VIVA)	4a 4b				
b			<del> </del>			
С 5	Add lines 4a and 4b  Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin		4c   5			
Part		<del>6 10 ) </del>	3			
	ete this part to provide the descriptions required for Part II, lines 3, 5, and	O: Port III, lines to and 4: F	lost IV Jugos 1b and Ob.			
	line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII,					
	ditional information	, inica za ana 46 Alao com	piete triis part to provide			
-	s Scholarships are made available to current students of Milwaukee Public Sc	chools through Funds The C	Colonel and Mrs. Farnet F			
	3 Solitora Sings are made available to carrent statements of minimatures i abile se		Coloner and Wiss. Larrise F.			
Liehm	ann Memorial Scholarship Fund was established to provide scholarship for a	graduating high school senic	or from Bay View High Sch			
	and methodial contours hip trains was established to provide seriours hip for a	graduating mgn school schic	The state of the s			
The M	ichael and Helen Jupka Memorial Scholarship Fund was established for the su	innert of Bradley Tech High	School for the purpose of			
	ichiaci and ricieri supra memoral scholarship i and was esablished for the st	ipport of Bradiey Tech Thigh	school for the purpose of			
award	awarding the Michael and Helen M. Jupka Memorial Scholarship, previously provided by Bradley Tech High School Both of these fund					
and any and and the record of these fund						
accon	nts are housed at the Greater Milwaukee Foundation, Inc					
	nis are needed at the Greater Willwaukee / Outhaatoll, IIIC	***				
			***************************************			
	•••••••••••••••••••••••••••••••••••••••		·			

Schedule D (For	m 990) 2011	Page 5
	Supplemental Information (continued)	
		······································
		•••••••••••••••••••••••••••••••••••••••
		•••••
		·····

# SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

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

► Attach to Form 990.

**%** □ (h) Purpose of grant or assistance **Employer identification number** Scholarship Awards Scholarship Award Scholarship Award to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. 39 1929112 ✓ Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes' Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. (e) Amount of non-cash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 30,000 5,000 5,000 (d) Amount of cash grant Part II can be duplicated if additional space is needed Enter total number of other organizations listed in the line 1 table (c) IRC section if applicable the selection criteria used to award the grants or assistance? General Information on Grants and Assistance (B) EIN Milwaukee Public Schools Foundation, Inc 3203 N Downer Ave, Milw53201-0500 (1) Univ of Wisconsin - Milwaukee (3) Univ of Wisconsin - Whitewater 800 W. Main St, Whitewater 53190 (4) 1 (a) Name and address of organization P.O. Box 1881, Milw, WI 53201 (2) Marquette University Name of the organization Part I Part II <u>છ</u> 9 E **©** 9 9 2

Schedule I (Form 990) (2011)

Cat No 50055P

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

Schedule I (Form 990) (2011)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed. (b) Number of recipients (a) Type of grant or assistance Part IV Part III ß 8 က 4 9

Schedule I (Form 990) (2011)

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

Department of the Treasury

Name of the organization

Internal Revenue Service

### 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.

20**11** 

Open to Public Inspection

Employer identification number

39 1929112 Milwaukee Public Schools Foundation, Inc. Form 990 Part III, 4d. Other program Services - The Foundation seeks to fund programs and projects not affordable though public funds to provide enhanced learning opportunities for students. These goals are met by donations from many different vessels, by individuals as well as other sources. Form 990 Part VI, Section A question 9 - Names and addresses of board that cannot be reached at the organizations mailing addresses **SEE ATTACHED** From 990, Part VI, Section B, question 11a and 11b - Completed 990 forms are shared with the Foundation Board of Directors during our regularly scheduled meeting that occurs most closely to the tax filing deadline Form 990, Part VI, Section C, question 19 - Governing documents, conflict of interest policy and financial statements are made available to the public during the tax year upon request Form 990, Part XI, question 5 - The amount of \$160,658 is noted as a change. It was received by the MPS Foundation to establish the Michael and Helen Jupka Fund. The Foundation then made a check in the same amount to the Greater Milwaukee Foundation to hold the funds there for investments purposes.

#### Milwaukee Public Schools Foundation, Inc.

5225 W. Vliet Street, P.O. BOX 2181, Milwaukee, WI 53201-2181 **Board of Directors** 

Mr. James Hall Hall Legal 759 N. Milwaukee Street, Suite 410 Milwaukee, WI 53202 Phone: 273-2001 jhh@hall-legal.com

Mr. David Meissner (Community representative) 694 Lake Shore Road Grafton, WI 53024 Phone: 262-375-1963 dmeis@wi.rr.com

Mr. Timothy Sheehy (Ms. Devon Turner)
Metropolitan Milwaukee Asso. of Commerce
756 N. Milwaukee Street
Milwaukee, WI 53202
Phone: 287-4125
tsheehy@mmac.org
dturner@mmac.org

Ms. Roxanne Starks (Parent representative) 6614 N. 84th Street Milwaukee, WI 53224 Phone: 225-2182 rstarks@mmsd.com Mr. William Jenkins
Jenkins & Associates
1110 N. Old World Third Street, #340
Milwaukee, WI 53203
Phone: 225-8924
william@jenkinsassoc.com

Ms. Vel Phillips (Community representative) 1610 N. Prospect Avenue Milwaukee, WI 53202 Phone: 277-1414

Mr. Jeff Spence MPS School Board Member 3180 N. Colonial Drive Milwaukee, WI 53222 Phone: 535-0997 spencejd@milwaukee.k12.wi.us JSpence@milorganite.com

ATTACHMENT: Schedule O, Form 990

Ex-Officio Members \* Ex-Officio Members of the Board listed below are employees of the Milwaukee Public Schools. The MPS Foundation, Inc. has no employees.

\* Dr. Gregory Thornton. Superintendent of Schools Milwaukee Public Schools 5225 W. Vliet Street Milwaukee, WI 53208

Phone: 475-8001 Fax: 475-8585

gthornton@milwaukee.k12.wi.us

\* Denise Callaway Executive Director, MPS Foundation, Inc. 5225 W. Vliet Street

callawde@milwaukee.k12.wi.us

Milwaukee, WI 53208 Phone: 475-8650 Fax: 475-8585

\* Mr. Gerald Pace Treasurer of MPS Foundation, Inc. Milwaukee Public Schools 5225 W. Vliet Street Milwaukee, WI 53208

Phone: 777-9813 Fax: 475-8387

pacegi@milwaukee.k12.wi.us

Grant & Alloc. Part III

Part 11

	,	L	Part II		-	Part III			
	Fund		Program	Mgmt &	Fund-	Grant &	Travel	Other	Conferences
		Total	Services	General	raising	Alloc.			Conventions
									Meetings
Fernwood Expense - United States Postal Service - Fundraiser	Fernwood \$	132.00		132.00				132.00	
Hartford University Schl - Grant - Living Design Inc	Hartford \$	576.00	576.00			576.00			
Hartford AveDanceworks Inc - Grant	Hartford \$	2,000 00	5,000.00			5,000.00			
Hartford University Schl - Grant - Living Design Inc	Hartford \$	288.00	288.00			288.00			
Hartford Univ School - David Cory - Exp. For school Fund raiser	Hartford \$	2,444.12		2,444.12				2,444.12	
IDEAS - Dr. John w. Fantuzzo - Grant -Consulting	IDEAS \$	1,000.00	1,000.00			1,000.00			
IDEAS - Dr. Dennis Culhane - Grant - Consulting	IDEAS \$	1,000 00	1,000.00			1,000.00			
Maryland Avenue - Grant - Upper El. Natures classroom	Maryland \$	2,500.00	2,500.00			2,500.00			
MPS - Div of Facilities & Maintenance- Grant- Maryland Playground	Maryland \$	21,725.00	21,725.00			21,725 00			
Maryland Avenue - Grant - Urban Ecology Center 2010-2011	Maryland \$	5,000 00	5,000.00		<u> </u>	5,000.00			
Maryland Avenue School - Grant- 2011-12 Operating Exp	Maryland \$	25,936.00	25,936.00		<u>L</u>	25,936.00			
United Performing Arts Fund - Expenses - UPAF/Visions	MPS Arts \$	155.33		155.33				155.33	
MPS Scholarship Grant- Various	MPS Scholarship \$	40,000.00	40,000.00		<u> </u>	40,000.00			
Scholastic Inc -Grant - RIF	RIF Fund \$	25,384.22	25,384.22			25,384.22			
Milw Pub Sch-Div of Comm Recreation- Grant- Youth Games	US Youth Games \$	13,389.33	13,389.33			13,389 33			
MPS - Recreation - Grant- US Youth Games	US Youth Games \$	483.05	483.05		L.	483.05			
SERVICE FEE	Undesignated \$	7.20		7.20				7.20	
DEPOSIT ITEM RETURNED FEE	Undesignated \$	10 00		10.00	<u> </u>			10.00	
KLP Corp - Expense - UPAF data processing	Undesignated \$	756.44		756.44				756 44	
Office of Family Services - Grant - Homeless Prog	Undesignated \$	1,000.00	1,000.00			1,000 00	-		
MPS-Recreation Div- Grant - United St. Olympic Com	Undesignated \$	30,000.00	30,000.00		<u>]</u>	30,000.00			
Milwaukee Recreation - Grant - Milwaukee Heat Wheelchair B-Ball	Undesignated \$	7,070.00	7,070.00			7,070.00			
Dept of Financial Inst. For Wisc Nonstock Corp - Exp - Ann. Rep	Undesignated \$	10 00		10.00				10.00	
American Schools Found Alliance - Expense - Membership	Undesignated \$	150.00		150.00				150.00	
Milwaukee Recreation - Grant - Milwaukee Heat Wheelchair B-Ball	Undesignated \$	370.00	370.00			370 00			
Enid Montalvo-Crant- National Board of Prof Teaching Stand. Cert	Undesignated \$	1,000.00	1,000.00			1,000.00			
MMABSE- Grant- 9th ann teacher recognition Gala	Undesignated \$	2,000.00	2,000.00			2,000.00			
The Hartford - Exp - Liability Insurance	Undesignated \$	64.00		64.00				64.00	
Gladys R. Wilson & Associates - Exp. Audit	Undesignated \$	5,500.00		5,500.00			2	5.500 00	
GRANT - MPS COMBINED GIVING - Grant - various	Undesignated \$	5,000.00	5,000.00		_]	5,000.00			
The Hartford - Exp - Liability Insurance yearly prem	Undesignated \$	1.689.00	!	1,689.00				1,689.00	
Greater Milwaukee Foundation- Michael & Helen Jupka Fund	Undesignated \$	106,658.41	106,658.41			106,658.41			
Florida A&M University - Jupka Scholarship Grant - Ferriez Johnson	Undesignated	2,000.00	2,000.00			2,000 00			
MPS Recreation DIV - Grant - Recreation	Ondesignated >	750.00	7.00.00			750.00			
Lynde and Harry Bradley Tech - Grant- Jupka Scholarship Milymylog Bespecies Capt Milymylog Lock Whoolehold Bell	Undesignated	4,500 00	4,500.00		<u> </u>	4.500.00			
Milwaukee Recreation - Oralli - Milwaukee Fleat Wileelchail D-ball	Olidesignated	2,770.00	2,770.00	00 011		2,770.00		0000	
Cabalactic Inc. Companies - Exp. Elabinity Policy	Underignated >	1,350.00	02 021 7	00.000		4 120 20		00.0001	
SCHOIdSHIC, INC Ordin	Ondesignated	4,150.58	4,130.38		1	4,150.58			
Alliance school - Grant Scholostic Inc	Undesignated >	24.00	200.00			200.00			
MADE CARCOLT ANNUAL CARCO	Cindesignated \$	16 147')	16.142,1			1,241.91			
Mrs - school 10 Work - Grant	Undesignated >	92.30	05.20	000	1	92.50		0000	
Advised rund Management Fees	Advised	500.00		500.00				500.00	
Jupka Management Fees	Jupka	392.63	0000	392.63		00 07 0 01		392 63	
Jupka Payments/Expenditures	Jupka	0.240 00	10,240.00	000	_!_	10.240 00	<u> </u>		
Liebmann Management Fees	Liebmann +	2,377.90	00 000 01	2,377.90	.1	00000	1	2.5/7.90	
Liebmann Payments/Expenditures	Liebmann	00.000.01	10,000,00			10,000,00			

331,074.80

346,813.42

2011 IRS Functional Exp Fm 990 Parts II,III,IV FINAL xls

15,738.62

# Milwaukee Public Schools Foundation, Inc. Grants Awarded 2011 - as of 12/31/2011

Area of Support: Student Assistance Programs		
	<del> </del>	
Hartford School - Grant awarded to Hartford School to support the school's DanceWorks Movement Program (\$5,000). Grant awarded to Hartford School for Living Design, Inc. (\$288) Grant awarded to Hartford School for Living Design, Inc. (\$576)	\$	5,864
Michael and Helen M. Jupka Memorial Scholarship Fund - Grant to support students from Bradley Tech High School who plan to go to a college or university.(\$106,658.41) Scholarships Awarded to support students from Bradley Tech High School. (\$10,240) A grant was awarded to a Bradley Tech High School senior who will be attending Florida A& M University (\$2,000). Grant awarded to Bradley Tech High School (\$4,000).	\$	123,398
Colonel and Mrs. Ernst F. Liebmann Memorial Scholarship Fund - Grant - Scholarships awarded to graduating high school seniors from Bay View High School	\$	10,000
Maryland Avenue - Grant Upper elementary (\$2,500). Grant Urban Ecology Center (\$5,000) - Grant awarded to Maryland Avenue Montessori School to support the schools playground project. Funding is provided through generous donations from parents, staff, and community to the school's designated fund. (\$25,936)(\$21,725)	\$	55,161
MPS Scholarship - Grants -Scholarships awarded to students enrolled in the Milwaukee Public Schools to attend public college or university in the state of Wisconsin. The scholarships may be renewed for up to three years.	\$	40,000
Scholastic Inc -RIF - Grant awarded for the Milwaukee Public Schools District's Reading is Fundamental program.	\$	30,756
Alliance H.S Grant awarded to support Alliance High School. Funding was made possible through a donation designated for this purpose from Cream City Foundation.	\$	500
School Incentive Grants - Incentive grants of \$250 each were awarded to schools or departments for their improved record of giving in the 2010-2011 MPS Employee's Combined Giving		
Campaign	\$	5,000

MPS School to Work - Grants awarded to support the MPS School to Work Community Assistance and Training Program (CATP) to assist students with their direct needs such as work clothes, supplies and other necessary items that will help them make a successful transition from school to employment. Funding provided by graduates of MPS who are part of the group calling themselves Banter Association	\$	63
MPS Office of Family Services - Grant for the Homeless Program	٠,	1 000
MFS Office of Family Services - Grant for the Homeless Program	\$	1,000
Area of Support: After-School and Recreational Programs		
Milwaukee Recreation Dept - Milwaukee Heat - Grant awarded to support the MPS Recreation Department's Milwaukee Heat Wheelchair Basketball team for children with physical disabilities. Funding was made possible through donations from individuals	:	
and organizations designated for this purpose.	\$	10,210
MPS Division of Community Recreation - Grant awarded	\$	250
MPS Division of Community Recreation - Grant for United States Youth Games	\$	13,872
MPS Division of Community Recreation - Grant for United States Olympic Commission	\$	30,000
Area of Support: Teacher Education and Leadership Development		
IDEAS - Grant awarded for consulting services needed to develop the program.	\$	2,000
National Board for Professional Teaching Standards - MPS teachers awarded a grant for successfully completing the National Board for Professional Teaching Standards process	\$	1,000
Metropolitan Milwaukee Alliance of Black School Educators - Grant awarded to Metropolitan Milwaukee Association of Black School Educators as a sponsor of the Teacher Recognition	Ψ	1,000
Program held.	\$	2,000
Table Courts Association 2004		-
Total Grants Awarded in 2011	\$	331,075