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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)

2011

OMB No 1545-0047

Department of the Treasury

Open to Public

		te Service		anization may have to t	ise a copy of this let		<u> </u>	unements			
			ar year, or tax yea			10-01, 2011, and e	ending		09-30, 20 12		
B 0	heck if a	pplicable	C Name of organization	CLAREMORE PUB	LIC SCHOOLS FO	DUNDATION			D Employer identification no		
A	ddress c	hange	Doing Business As						73-1332426		
N	ame cha	inge	Number and street (c	or PO box if mail is not delivere	ed to street address)	_	Room/suite	•	E Telephone number		
[] It	utral retu	m	310 N WEEN	ONAH AVE							
Пт	erminate	d	City or town, state or	country, and ZIP + 4					257,696		
$\overline{\Box}$ A	mended	return	Claremore,	OK 74017			G Gross receipts \$				
\Box	pplicatio	n pending	•	of principal officer BRET	T LESSLEY						
	•	, ,	Same as C				H(a) Is	this a group filiates?	return for Yes X No		
	ax-exem	nt etatue 🔻	501(c)(3) 501(c		4947(a)(1) or	527		re all affiliates			
		► N/A	301(0)(3)	(insertino)	+947 (a)(1) of		— `´ #'	"No," attach a	a list (see instructions)		
			Corporation Trust	Association Other		T. V		roup exempti			
				Association Other	<u> </u>	L Year of formation		M State of le	egai domicile OK		
Pai	T	Summar				0 100TOM MUTO 0	CHOOT C		ACTIVIC MITT		
	1		=	n's mission or most sigr	_	O ASSIST THE S	CHOOLS .	IN IMPE	COVING THE		
A C G	1	QUALITY	OF EDUCATION	IN THE DISTRICT					 		
c G t o											
l y											
iς	2		· -	nization discontinued its				l l	1		
t n i a	3		_	he governing body (Par							
е п	4	Number of I	dependent voting i	members of the govern	ng body (Part VI, lin	e 1b)		4	20		
5 C	5	Total numbe	of individuals emp	oloyed in calendar year	2011 (Part V, line 2a)			1		
8.	6	Total numbe	of volunteers (est	mate if necessary) .				🕞	5		
	7a			ue from Part VIII, colum					a 0		
				income from Form 990					ь 0		
	 				1,			Year	Current Year		
R	8	Contribution	and grants (Part)	/III, line 1h)				103,1			
v	9			VIII, line 2g)		-			100,222		
e	1	-	•	•		_		43,6	42 89,475		
ü	10			olumn (A), lines 3, 4, ar				43,6	42 69,475		
е	11		•	n (A), lines 5, 6d, 8c, 9d		<u></u>			0		
	12			ugh 11 (must equal Par				146,8	02 257,696		
	13		-	d (Part IX, column (A),	· ·	<u> </u>			0		
E	14	Benefits paid	to or for members	(Part IX, column (A), li	ne 4)	[0		
x	15	Salaries, oth	er compensation, e	employee benefits (Part	IX, column (A), lines	s 5-10)		33,3	71 36,929		
P e	16a	Professional	fundraising fees (F	Part IX, column (A), line	11e)				0		
n	b	Total fundra	sing expenses (Pai	t IX, column (D), line 25	5) ▶	111,540					
e	17	Other expen	ses (Part IX, colum	n (A), lines 11a-11d, 11				79,4	18 185,145		
5				7-(must equal Part IX, o				112,7	89 222,074		
				act line 18 from line 12				34,0			
Net	+	131	FEB 1 9 201				Beginning of (End of Year		
Assets	20	Total assets	「ED 』が とい (Part X, line 16)	Sil		}		,872,1			
or Fund	21	1 1	s (Part-X;-line,26)	انسةا		· · · · · · · · · · ·			11 786		
Bal- ances	22	A 1	- 16 17 - 18 - 18 - 18 - 18 - 18 - 18 -	subtract line 21 from line		• • • • • • • • • • • •	1	,871,4			
Pai		<u></u>	re Block	dottaccine 21 nom mie	20	• • • • • • • • • • • • • • • • • • • •		.,0,1,4	1,307,007		
				this return, including accompar	yung schedules and statem	ents and to the hest of my l	knowledge and	belief it is			
				than officer) is based on all inf			go and	11 13			
•		<u> </u>	111-	1001	•				2 10 12		
C:	_	2	pho	1 lear					2-15-13		
Sigi	- 1	Signatur	e of officer	11000 -	A . A . A . A			Ð	ate		
Her	e	_	KObbie	Nees 7	REASUREK						
·		Type or	orint name and title								
		Print/Type pre	parer's name	Preparer's signature		Date	Che	eck 🔀 ıf	PTIN		
Paid	1	VIOLET	F KIRKENDALL	Vives		01-17-2013	self	f-employed	P00162123		
	arer							▶ 66-	1676035		
	Only			W CLAREMORE ST			Phone no	- 00	No. 1-000		
-55	Viii)			remore OK 74017					918-342-5474		
Max	he IDS	E discuss this			oo instructions)		1				
				parer shown above? (s		<u> </u>	• • • • •	· · · · ·			
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73-1332426

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CLAREMORE PUBLIC SCHOOLS FOUNDATION Form 990 (2011) 73-1332426 Page 3 Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes." 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 Х Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 4 X 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 98-197 If "Yes," complete Schedule C, 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 X 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 X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X 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," 9 X 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 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 as applicable a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," X b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more 11b X c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more 11c Х d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f Χ Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a 12a Х Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if 12b the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 13 13 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investmetht, and program service activities outisde the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes,' complete Schedule F, Parts I and IV 14b X 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 X Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance

> Х 20h Form 990 (2011)

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20a

X

X

X

Х

to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV

Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H b If "Yes" to line 20a, did the organization attach its audited financial statements to this return?

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Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization 21 in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II. 21 Χ Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X 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 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 last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a X 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a 25a Χ Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior b year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 # 7% Part IV instructions for applicable filing thresholds, conditions, and exceptions) X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X c 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 29 29 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 30 X Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 X Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," 32 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 33 X Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 Χ 35a 35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the 35b Х Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 37 X

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Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

Part V Statements Regarding Other IRS Filings and Tax Compliance

	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			
Ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			J
þ	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X_
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a	. 477	_X_
Đ	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	. \$	ď.	
F		5a		
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		<u>X</u> X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
Va	organization solicit any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		1 4 %	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	4-	***	
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	38/88 3	3 3	* * 2
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<u>X</u>
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u>X</u>
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	3	_X_
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	ķ.	; ,	. ,
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			لـــــا
_	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		$\frac{X}{X}$
ь 10	Section 501(c)(7) organizations. Enter	30	- 3;	
a	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			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	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.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			<u></u> _
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> X</u>
Þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

CLAREMORE PUBLIC SCHOOLS FOUNDATION Form 990 (2011) 73-1332426 Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Section A. Governing Body and Management Yes No 20 If there are material differences in voting rights among members of the governing body, or If the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent 20 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following Each committee with authority to act on behalf of the governing body? Х Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 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 X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12a Χ b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? 13 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a X 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 16a Х 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 X Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **\rightarrow** OK Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

- - Another's website X Upon request
- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization >

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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

(A)	(B)	(B) (C)						(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule	box, ι	r and	Pos eck mo s pers a dire	on is ctor/to	an one both an rustee) H c e I o m g m p h p l	For		Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
	O)	ıse vtc ıet deo	t s ı t t e	c e	e m s n y p t s e t e t e e e		m e r			
(1) ANITA MCGUIRE						İ				
DIRECTOR	1.00	X							0	0
(2) CARLA LYNCH		İ								
DIRECTOR	1.00	X						C	0	0
(3) GINA BRIM										
DIRECTOR	1.00	X						C	0	0
(4) JANETTE PARKER				ł						
DIRECTOR		X						0	0	0
(5) JOHN WILLIAMS JR										
DIRECTOR	1.00	X						C	0	0
(6) KIM COX										
DIRECTOR	1.00	X						C	0	0
(7) LESLIE SWATEK										
DIRECTOR		X						C	0	0
(8) MICKEY PERRY										
DIRECTOR		Х						C	0	0
(9) MISTY CHOAT										
DIRECTOR		X							0	0
(10)PHIL ALBERT										-
DIRECTOR	1.00	X						(0	0
(11)ROD HENRY										
DIRECTOR	1.00	X						(0	0
(12)RYAN NEELY										
DIRECTOR	1.00	X						(0	0
(13)SALESHA WILKEN							1			
DIRECTOR	1.00	X						l c	0	o
(14)STEPHANIE KUYKENDALL				İ			Γ			
DIRECTOR	1.00	l x	l				l	۱ .	o	o

	-,,	- , ,			,			toutou zinpiojoo	- (
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	(do o	at ch		ution	han one		Reportable	Reportable	Estimated
	hours per week					both an	1	compensation from	compensation from related	amount of other
	(describe	office	er and	direc	tor/tn	ustee)		the	organizations	compensation
	hours for	l t d			к	Нсе	F	organization	(W-2/1099-MISC)	from the
•	related organizations	dur	n r s u	f	e y	gmp	o r	(W-2/1099-MISC)		organization and related
	in Schedule	ı s e	t s		е	h p i e e o	m e			organizations
	0)		t e	(e	m p	s n y t s e	ſ			
		u r ao				a e				
		lī r	0		y e	ė				
			a		8	"				
(15)TAMMY THOMAS		┼	÷			 				
DIRECTOR	1.00								o	
(16)AMY EVANS	1.00	X	 	-	-	 				0
SECRETARY	1 00			١,,					_	
	1.00	_		X		ļ		-	0	0
(17)BRETT LESSLEY				۱		ĺ				
PRESIDENT	2.00	-	-	X	<u> </u>		ļ	0	0	0
(18)MATT MASON									_	_
VICE PRESIDENT	1.00	ļ		X	<u> </u>	ļ		0	0	0
(19)ROBBIE NEES					ŀ					
TREASURER	1.00			X	L			0	0	0
(20)										
(21)									•	
			L							
(22)	-									
(23)										-
	1									
(24)										
	-	}								
(25)										
1b Sub-total							lacksquare			
c Total from continuation sheets to Part VII, Section	n A									
d Total (add lines 1b and 1c)								o	0	0
2 Total number of individuals (including but not limited	_						ore	than \$100,000 in	-	·
reportable compensation from the organization			•						0	
<u> </u>				_				•		Yes No
3 Did the organization list any former officer, director	or trustee, ke	y empl	oyee	е, ог	higl	hest co	ompe	ensated		
employee on line 1a? If "Yes," complete Schedule J		-	-		-					3 X
4 For any individual listed on line 1a, is the sum of rep										—
organization and related organizations greater than										
ındıvıdual				•						4 X
5 Did any person listed on line 1a receive or accrue co										
for services rendered to the organization? If "Yes," or	•					_				5 X
Section B. Independent Contractors					-					
Complete this table for your five highest compensations.	ed independe	nt cont	tract	ors t	hat	receiv	ed m	ore than \$100 000) of	
compensation from the organization Report compe										
year				,	0	g	0.	within the organia	ulion o tux	
(A)								(B)		(C)
Name and business addres:								Description of se	POVICES	Compensation
				_				- Josephan State		
								1		
								1	-	 -
										· · · · · · · · · · · · · · · · · · ·
2 Total number of independent contractors (including l	out not limited	to the	ا مو	eter	aba	(a)	hc			
				SICU	au(JVE) W	110			
received more than \$100,000 of compensation from	uie organizai	ION 🚩							i	

Part	AIII	Statement of Revenue					
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u> </u>	1a	Federated campaigns 1	a				
	'-	Membership dues		1			
Contri-	c	Fundraising events		-			
butions, Gifts,				-			
Grants	d			4			
and	e	Government grants (contributions) 1	168,221	4			
Other Smular	1	All other contributions, gifts, grants,	_				
Amounts		and similar amounts not included above 1		1			
	9	Noncash contributions included in lines 1a-1f	·				
	h	Total. Add lines 1a-1f	<u> </u>	168,221			
			Business Code				
	2a						
D	ь					-	
Program Service	С	-	<u> </u>				
Revenue	d				-		
	e						
	f	All other program service revenue	_				
		Total. Add lines 2a-2f					
		Investment income (including dividends, intere					
	"	and other similar amounts)		89,475	89,475		
	4	Income from investment of tax-exempt bond p					
		Royalties	_				
		(i) Real	(II) Personal		· , ,,		
	62	Gross rents	(ii) i croonar				
		Less rental expenses	 -				
		Rental income or (loss)					
	1	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(II) Other				
	b	Less cost or other basis and sales expenses					
0	c	Gain or (loss)	· · · · · · · · · · · · · · · · · · ·				
h		Net gain or (loss)					
е		Gross income from fundraising					
r	- Ju	events (not including \$					
R		of contributions reported on line 1c)					
е		See Part IV, line 18					
e			;				
n		Net income or (loss) from fundraising events	<u> </u>				
u e		Gross income from gaming activities					<u> </u>
		See Part IV, line 19					
			; 				
		Net income or (loss) from gaming activities					
			• • • • • • • • •				
	10a	Gross sales of inventory, less returns and allowances					
		Less cost of goods sold					
	С	Net income or (loss) from sales of inventory .	.				
		Miscellaneous Revenue	Business Code				
	11a						
	b			<u> </u>			
	С						
		All other revenue					
		Total. Add lines 11a-11d					
	12	Total revenue. See instructions	>	257,696	89,475	_0	0

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 response to any ques				
	not include amounts reported on lines 6b, 7b, 3b, 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			3	
•	organizations in the United States See Part IV, line 21.				
2	Grants and other assistance to individuals in				
-	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	34,305		34,305	-
8	Pension plan accruals and contributions (include	, , , , , , , , , , , , , , , , , , , ,		<u>'</u>	
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,624		2,624	
11	Fees for services (non-employees)	<u> </u>	-	·	·····
а	Management				
b	Legal				
c	Accounting	5,150		5,150	
d	Lobbying	· <u>·</u> ···			
е	Professional fundraising services See Part IV, line 17.			× · · · · ·	=1
f	Investment management fees				
g	Other				
12	Advertising and promotion	852	852		_
13	Office expenses	2,178	2,178		
14	Information technology	-			
15	Royalties				
16	Occupancy				
17	Travel	456	456		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				<u> </u>
21	Payments to affiliates				
22	Depreciation, depletion, and amortization [
23	Insurance	1,142	1,142		
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)				
а	AWARDS	54,564	54,564		
b	DONATIONS	150	150		
С	TELEPHONE	600	600		
d	SUPPLIES	111,540			111,540
е	All other expenses	8,513	8,513		
25	Total functional expenses. Add lines 1 through 24e .	222,074	68,455	42,079	111,540
26	Joint costs. Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here				
	following SOP 98-2 (ASC 958-720)		<u> </u>		

art X	Balance Sheet			32426 Page
art A	Dalalice Silect	(A)	Т	(B)
		Beginning of year		End of year
	Cook and interest bearing	216,572	1	84,93°
1 1	Cash - non-interest-bearing			
2	Savings and temporary cash investments	848,983	2	412,92
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	
5	Receivables from current and former officers, directors, trustees, key			
	employees, and highest compensated employees. Complete Part II of		<u> </u>	
	Schedule L		5	
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	
7	Notes and loans receivable, net	-	7	
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	» »		
ь	Less accumulated depreciation 10b		10c	
11	Investments - publicly traded securities		11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11	806,621	13	1,410,01
14	Intangible assets	000,022	14	
15	Other assets See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	1,872,176	16	1,907,87
17		711	17	78
18	Accounts payable and accrued expenses	,11	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	(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	21	
22	Payables to current and former officers, directors, trustees, key			
	employees, highest compensated employees, and disqualified persons	<u> </u>		
	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24) Complete Part X			
	of Schedule D		25	
26	Total liabilities. Add lines 17 through 25	711	26	78
	Organizations that follow SFAS 117, check here ▶ 🂢 and complete			
F	lines 27 through 29, and lines 33 and 34.		1	
u n 27	Unrestricted net assets	1,726,310	27	1,848,08
d 28	Temporarily restricted net assets	145,155	28	59,00
29	Permanently restricted net assets		29	
B a	Organizations that do not follow SFAS 117, check here ▶ ☐ and			
ī	complete lines 30 through 34.			
a 30	Capital stock or trust principal, or current funds		30	1
n 30 C 31	Paid-in or capital surplus, or land, building, or equipment fund		31	
8 32	Retained earnings, endowment, accumulated income, or other funds		32	
s 32	Total net assets or fund balances	1,871,465	33	1,907,08
		1,872,176	34	1,907,87
34	Total liabilities and net assets/fund balances	1,012,110	34	Form 990 (20

Form	$\alpha \alpha \alpha$.,,00	441	
-om	990	11/0	,,,,	

73-1332426

Page 12

Pa	【製工 Reconciliation of Net Assets						
	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		257,6	696		
2	Total expenses (must equal Part IX, column (A), line 25)	2		222,0	074		
3	Revenue less expenses Subtract line 2 from line 1	3		35,6	622		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,	871,4	165			
5	Other changes in net assets or fund balances (explain in Schedule O)						
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,						
	column (B))	6	1,	907,0	087		
Pa	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 🔲 Accrual 🔲 Other		157				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in						
	Schedule O				7.1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X			
þ	Were the organization's financial statements audited by an independent accountant?		2b	X			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight						
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		_X_		
	If the organization changed either its oversight process or selection process during the tax year, explain in						
	Schedule O						
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were						
	issued on a separate basis, consolidated basis, or both			3.8			
	Separate basis Consolidated basis Both consolidated and separate basis			4			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in						
	the Single Audit Act and OMB Circular A-133?		3a		X_		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the						
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				
	EEA		Form	n 990 (2	2011)		

SCHEDULE A (Form 990 or 990-EZ)

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.

Employer identification number

2011

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

		ORE PUBLIC SCH	HOOLS FOUNDAT	ION					73-	1332426		
Pa	rt I	Reason for	Public Charit	y Status (All organiz	ations mus	st complet	e this part) See inst	ructions			
The	orga	•		ause it is (For lines 1 thi	•	•	•					
1		A church, convention	on of churches, or a	association of churches	described	ın section	170(b)(1)	(A)(i).				
2		A school described	ın section 170(b)((1)(A)(ii). (Attach Schedu	ule E)							
3		A hospital or a coop	perative hospital se	ervice organization descr	ibed in se	ction 170(b)(1)(A)(iii	i).				
4		A medical research	organization opera	ated in conjunction with a	a hospital (described	n section	170(b)(1)	(A)(iii). Er	iter the ho	spital's r	iame,
		city, and state										
5		An organization ope	erated for the bene	fit of a college or univers	sity owned	or operate	d by a gov	/ernmenta	I unit desc	ribed in		
		section 170(b)(1)(A	A)(iv). (Complete P	'art II)								
6		A federal, state, or I	ocal government o	or governmental unit des	cribed in s	ection 17	0(b)(1)(A)(v).				
7		An organization that	t normally receives	a substantial part of its	support fro	om a gove	rnmental u	ınıt or fron	the gene	ral public		
		described in section	n 170(b)(1)(A)(vi).	(Complete Part II)								
8		A community trust of	described in sectio	on 170(b)(1)(A)(vi). (Con	nplete Part	:11)						
9	X	An organization that	t normally receives	(1) more than 33 1/3%	of its supp	ort from c	ontribution	s, membe	ership fees	, and gros	s	
		receipts from activit	ies related to its ex	cempt functions - subject	t to certain	exception	s, and (2)	no more t	han 33 1/3	% of its		
		support from gross	investment income	and unrelated business	taxable in	come (les	s section 5	511 tax) fro	m busine	sses		
		acquired by the orga	anızatıon after Jun	e 30, 1975 See section	509(a)(2)	. (Complet	e Part III)					
10		An organization org	anized and operate	ed exclusively to test for	public safe	ety See se	ection 509	(a)(4).				
11		An organization org	anized and operate	ed exclusively for the bei	nefit of, to	perform th	e function:	s of, or to	carry out t	he		
		purposes of one or	more publicly supp	orted organizations des	cribed in s	ection 509	(a)(1) or se	ection 509	(a)(2) See	section		
		509(a)(3). Check the	e box that describe	es the type of supporting	organizati	on and co	mplete line	s 11e thro	ough 11h			
		a 🗌 Type I	b 🗌 Тур	e II] Type III	-Functiona	illy integrat	ted	d	Туре	III-Other	•
е		By checking this box	x, I certify that the	organization is not contr	olled direc	tly or indire	ectly by on	e or more	disqualifie	ed		
		persons other than t	foundation manage	ers and other than one o	r more put	olicly supp	orted orga	nizations d	described i	n section		
		509(a)(1) or section	509(a)(2)									
f		if the organization re	eceived a written d	etermination from the IR	S that it is	a Type I,	Type II, or	Type III su	pporting			
		organization, check	this box									П
g		Since August 17, 20	06, has the organ	zation accepted any gift	or contribi	ution from	any of the					
		following persons?										
		(i) A person who	directly or indirectly	controls, either alone o	r together	with perso	ns describ	ed in (ii)				Yes No
		and (III) below,	the governing bod	y of the supported organ	nzation?						11g(i)	
		(ii) A family memb	er of a person des	cribed in (i) above?							11g(ii)	
		(iii) A 35% controll	ed entity of a perso	on described in (i) or (ii)	above? .						11g(iii)	
h		Provide the following	g information abou	t the supported organiza	ation(s)						_	
	(ı) N	ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the o		(v) Did yo	-		s the		Amount of
		organization		(described on lines 1-9 above or IRC section	in col (i) lis	•	the organi col (i)		organizati (i) organiz		s	support
				(see instructions))				oort?		\$?]	
					Yes	No	Yes	No	Yes	No]	
(A)												
(B)					1							
(C)												
						L						
(D)												
							<u> </u>	<u></u> .				
(E)												
							<u></u>				<u></u>	
										<u> </u>		
Total			Į.	1	1	1	l '		1	I	i	

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) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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 < 2 shown on line 11, column (f) Public support. Subtract line 5 from In 4 Section B. Total Support (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total Calendar year (or fiscal year beginning in) ▶ Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)..... 11 Total support. Add lines 7 through 10 . 12 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage 14 15 15 % 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 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 ▶□ 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Page 3

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)

Sec	ction A. Public Support	·-·					
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include				.,		
2	any "unusual grants ")	70,170	70,170	83,412	103,160	168,221	495,133
-	dise 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 bus under sec 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	70,170	70,170	83,412	103,160	168,221	495,133
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6)						495,133
Sec	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	70,170	70,170	83,412	103,160	168,221	495,133
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	36,778	96,763	76,014	43,642	89,475	342,672
	sources	30,770	30,703	70,014	43,042	03,473	342,072
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	36,778	96,763	76,014	43,642	89,475	342,672
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	106,948	166,933	159,426	146,802	257,696	837,805
	First five years. If the Form 990 is for the o organization, check this box and stop here			th, or fifth tax year	as a section 501(c)(3)	▶□
	ction C. Computation of Public Su						
	Public support percentage for 2011 (line 8, o	• • •	•			15	59.10 %
	Public support percentage from 2010 Scheo						51.17 %
	ction D. Computation of Investme					, <u> </u>	
17	Investment income percentage for 2011 (lin					17	40.90 %
18	Investment income percentage from 2010 S	ichedule A, Part III	l, line 17			_18	48.83 %
	33 1/3% support tests - 2011. If the organi 17 is not more than 33 1/3%, check this box	and stop here. T	he organization qu	alifies as a publicl	y supported organ	ization	▶□
D	33 1/3% support tests - 2010. If the organiline 18 is not more than 33 1/3%, check this	zation did not ched box and stop her	ck a box on line 14 re. The organizatio	or line 19a, and li n qualifies as a pu	ne 16 is more thar iblicly supported o	ı 33 1/3%, and rganization	▶□
20	Private foundation. If the organization did	•				=	. =

SCHEDULE D . (Form 990)

Department of the Treasury

Supplemental Financial Statements

► 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.

OMB No 1545-0047

2011

Open to Public

Inspection Internal Revenue Service Name of the organization Employer identification number CLAREMORE PUBLIC SCHOOLS FOUNDATION 73-1332426 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (b) Funds and other accounts Total number at end of year 1 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Did the organization inform all donors and donor advisors in writing that the assets held in donor advised Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV. line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2b b C Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Га	rt III Organizations Maintaining									ts (contint	iea)
3	Using the organization's acquisition, accession	, and ot	her record	is, check an	y of the fol	lowing that a	re a sigi	nificant use of its			
	collection items (check all that apply)		_								
а	Public exhibition		d 🗌 L	oan or excha	ange progr	ams					
þ	Scholarly research		e 🗌 C	Other						_	
C	Preservation for future generations										
4	Provide a description of the organization's colle	ections a	ınd explai	n how they f	urther the	organization'	s exemp	ot purpose in			
	Part XIV										
5	During the year, did the organization solicit or re	eceive d	lonations	of art, histori	cal treasu	res, or other	sımılar				
	assets to be sold to raise funds rather than to b	e maint	ained as	part of the or	ganızatıor	s collection	7			☐ Yes	☐ No
Pa	rt IV Escrow and Custodial Arra										
	Part IV, line 9, or reported an amour	nt on Fo	m 990, F	Part X, line 2	I						
1a	Is the organization an agent, trustee, custodian	or othe	r intermed	diary for conf	ributions	or other asse	ts not				
										Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV ar	nd comp	lete the fo	ollowing table	•					_	_
	•			•				A	mou	nt	
С	Beginning balance						10	;	-		
d	Additions during the year						· ·				
e	Distributions during the year						· · · -				
f	Ending balance						. 11				
2a	Did the organization include an amount on Forr						· · 🗀			Yes	No
b	If "Yes," explain the arrangement in Part XIV			•••							
	t V Endowment Funds. Complete	if the or	ganizatio	n answered '	'Yes" to Fo	rm 990 Par	t IV line	10			
<u>,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, </u>	as a second seco		urrent year		or year	(c) Two year		(d) Three years bac	-k	(e) Four years	back
1a	Beginning of year balance	1,		(-,		(4)		(,,		(2.2) (基)	
b	Contributions								ž	/ / /	**************************************
c	Net investment earnings, gains, and losses								2		
d	Grants or scholarships			-					\dashv	4	47.7
e	Other expenditures for facilities					 			-	acias mana	
C	· ·								3		
	Administrative expenses								$-\mathbf{f}$		
	· · · · · · · · · · · · · · · · · · ·			_		<u> </u>			- 1	- X	20 to 5 to 5
g 2	End of year balance		ad balans		aluma (a)	hold on				` ` `	
	Board designated or quasi-endowment	it year e	mu balanc	be (lille Ty, C	Diulilii (a))	ileiu as					
a	Permanent endowment \(\bigs\)		 70								
b			07								
С	Temporarily restricted endowment	4	<u></u> %								
_	The percentages in lines 2a, 2b, and 2c should										
3a	'	ion or th	e organiz	ation that are	e neia ana	administere	a for the				Т
	organization by									Yes	No
	(i) unrelated organizations	• • •	• • • • •	• • • • • •	• • • • •	• • • • • •			• •	3a(i)	<u> </u>
	(ii) related organizations					• • • • •			• •	3a(ii)	
b	If "Yes" to 3a(II), are the related organizations li					• • • • •			• •	3b	
4	Describe in Part XIV the intended uses of the o							<u> </u>			
Pa	rt VI Land, Buildings, and Equip	ment.	. See Fo	rm 990, Part	X, line 10						
	Description of property		(a) Cost or			st or other		Accumulated		(d) Book value	•
			(inves	stment)	basis	s (other)	°	epreciation			
1a	Land	· • • L					ļ				
b	Buildings	· • • <u> </u>					ļ				
С	Leasehold improvements	. L									

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Part VII	investments - Other Securities.	See Form 990, Part X, line 12			
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuati Cost or end-of-year market		
(1) Financial of	ferivatives				
	ld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)				·	
(F)					
(G)				·	
(H)					
<u>(I)</u>					
	o) must equal Form 990, Part X, col (B) line 12)				
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		
(1) INVES	TMENTS	1,410,014			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
	o) must equal Form 990, Part X, col (B) line 13)	1,410,014		_	
Part IX	Other Assets. See Form 990, Part X, In	e 15			
	(a)	Description		(b) Book value	
(1)					
(2)					
(3)					
(4)	<u>.</u>				
(5)					
(6)				<u> </u>	
(7)					
(8)	_		-		
(9)					
(10)		1			
	n (b) must equal Form 990, Part X, col (B) line		<u> ▶</u>	<u>.</u>	
Part X	Other Liabilities. See Form 990, Part X,	T	<u> </u>		
1.	(a) Description of liability	(b) Book value			
	income taxes		4		
(2)			4		
(3)			4		
(4)		<u> </u>	4		
(5)			4		
(6)		_	4		
(7)		+	4		
(8)			4		
(9)		<u> </u>	4		
(10)		 	4		
(11)			4		
Total. (Column (t	o) must equal Form 990, Part X, cot (B) line 25)		<u></u>		

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	tements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	257,696
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	222,074
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	35,622
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	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	35,622
	rt XII Reconciliation of Revenue per Audited Financial Statements With Revenue pe	1 1	
1	Total revenue, gains, and other support per audited financial statements	1	257,696
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	t t		
a			
b	Donated services and use of facilities	-	
С.	Recoveries of prior year grants	-	
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	257,696
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	_	
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	257,696
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Retu	ırn
1	Total expenses and losses per audited financial statements	1	222,074
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	-	
С	Other losses		
d	Other (Describe in Part XIV)	7 1	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	222,074
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	ㅋ	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	222,074
	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, Part IV, lines 1	h	
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
	part to provide any additional information	•	
11113	vart to provide any additional information		
			<u> </u>
			
		-	

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SCHEBULE O . (Form 990 or 990-EZ)

Department of the Treasury

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.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization Employer identification number CLAREMORE PUBLIC SCHOOLS FOUNDATION 73-1332426 01. Form 990 governing body review (Part VI, line 11) THE FORM 990 IS MADE AVAILABLE TO BOARD MEMBERS. 02. CEO, executive director, top management comp (Part VI, line 15a) BOARD APPROVES ALL SALARY AMOUNTS PAID. 03. Other officer or key employee compensation (Part VI, line 15b BOARD OF DIRECTORS APPROVES ALL SALARY AMOUNTS PAID. 04. Governing documents, etc, available to public (Part VI, line 19) ALL DOCUMENTS ARE AVAILABLE TO PUBLIC UPON REQUEST.