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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ► The organization may have to use a copy of this return to satisfy state reporting requirements. OMB No 1545-0047 2012

Open to Public Inspection

A	For the	ZUIZ calen	dar year, or tax y	ear begin	ining //U	'T	, 2012,	, and ending			, 2013	
В	Check if a	applicable	С	-						Employer Iden	tification Number	
	Addr	ess change	FOUNDATION	FOR S	PRINCETE	ID PUBL	TC SCHOO	ot. ¢		43-1560	1366	
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	\vdash	ıl return		,					<u> </u>	(41/) 6	364-3918	
	Term	nnated										
	Ame	nded return								Gross receipts		<u>918.</u>
	Appli	ication pending	F Name and addre	ss of principa	al officer				H(a) Is this a g	roup return for af	filiates? Yes	X №
			Same As C	Above]'	(b) Are all aff	iliates included? ach a list (see in	Yes Yes	∐ No
ī	Tax-exe	empt status	X 501(c)(3)	501(c) () ◄ (in	sert no.)	4947(a)(1) or	527	11 140, att	acira iist (see iii	istructions)	
Ť	Webs					<u>:</u>	1 1111		H(c) Group exe	mption number 1	>	
K		f organization	X Corporation	Trust	Association	Other -		Year of Formation	_		legal domicite MO	
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<u></u>	B IV	et uniterated	Dusiness taxabi	e income	1101111 01111 9	30-1, line 3-	<u>* </u>	 ·	Dela	r Year	Current Yea	
Revenue Acti	ا		and avents (Dec	4 \ /	16)							_
يو (2			and grants (Par			•		• • • • •		612,779.	756,	892.
Ø₽			rice revenue (Pa					-1		127 224	0.7	00.0
ě			ncome (Part VIII,				1110	_		137,324.	87,	926.
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			e – add lines 8 ti					ide ^{D(E)}		750,103.	844,	
			ımılar amounts p					161		<u>607,312.</u>	593,	<u>351.</u>
	14 B	lenefits paid	to or for member	ers (Part I	X, columij (A), liper42 1	B Sais	/ŵ,				
	15 S	alaries, othe	er compensation	, employe	e benefits	art IX, colur	nn (A), lines	<u>5.5! [@)</u>		161,024.	161,	748.
Expenses	16a P	rofessional	fundraising fees	(Part IX,	column (A)	ine 11e)	VEN U	γ				
ē	L T	otal fundrais	tundraising tees sing expenses (F ses (Part IX, colu	Part IX co	Jump (D) Jump	25) CG	DEIN, O	32,527.	•		• • •	· ·
滋	D	otal luliulais	sing expenses (i	4 L	11-11	20)		32, 321.	ļ —	120 270	116	
_	17 0	Aller expens	ics (i ait ix, coid	(7 9),	inco i la i la,	111 = 10)		•		139,372.	116,	
		•	es Add lines 13-	-	-), line 25).			907 <u>,</u> 708.	871,	
		Revenue less	expenses Subt	ract line 1	18 from line 1	2				157,605.	-26,	<u>809.</u>
9 9										of Current Year		
Net Assett Fund Balan	20 T	otal assets	(Part X, line 16).			•			3,	671,946.	4,320,	<u>611.</u>
₹ 2	21 T	otal liabilitie	s (Part X, line 20	6) .						<u>184,010.</u>	602,	<u> 100.</u>
žΞ	22 N	let assets or	fund balances.	Subtract I	ine 21 from li	ne 20			3.	487,936.	3,718,	511.
Pa	art II	Signatur	e Block				_		<u> </u>		·	
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com	plete Deci	laration of prepa	rer (other than officer)	is based on	all information of	which preparer	has any knowle	edge				
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Ma	v the IP	S discuss th	us return with the				ructions)					No

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

TEEA0113L 12/18/12

Form 990 (2012)

Par		Statement of Program Service Accomplishments	43-1360	300	raye z
гal	. 111	Check if Schedule O contains a response to any question in this Part III.			
	Drive		•••••		
ı		ly describe the organization's mission:			
	KAI:	SE MONEY TO BENEFIT THE PUBLIC SCHOOLS OF SPRINGFIELD MO			
			~		
				_	
2		ne organization undertake any significant program services during the year which were not listed on the	prior	, ,	7
		990 or 990-EZ?	[_ Yes ∑	No
		s,' describe these new services on Schedule O	-	-	7
3		he organization cease conducting, or make significant changes in how it conducts, any program	services?	Yes	No
		s,' describe these changes on Schedule O.	_	_	
4	Descr Section others	ribe the organization's program service accomplishments for each of its three largest program son 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amounts, the total expenses, and revenue, if any, for each program service reported.	ervices, as meas t of grants and all	sured by exponential ocations to	enses
			-		
4 a	(Code)
		NTS WERE AWARDED FOR VARIOUS CURRICULUM ENHANCEMENTS. MORE	THAN 5000	STUDENTS	<u> </u>
	AND.	OR TEACHERS WERE RECIPIENTS OF GRANTS			
					
4 b		e) (Expenses \$ 147,600 including grants of \$ 147,600 .) NTS AND SCHOLARSHIPS WERE AWARDED TO MORE THAN 250 STUDENTS T-SECONDARY TUITION AND NON-TECHNICAL CLASSROOM PROJECTS		CHERS FO) DR)
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	/C= 1) (European & 00 754 maluding and to \$ 00 754)	(Payania &		<u> </u>
40	(Code			85,	600.)
	INS	EACHERS APPRECIATION BANQUET WAS HELD TO RECOGNIZE OUTSTANDI TRUCTIONAL STAFF. APPROXIMATELY 2000 TEACHERS ATTENDED AND IR WORK			
		·			· /
			~		
4 d		program services. (Describe in Schedule O.)			
	(Expe		\$)	
4 e	Total	program service expenses ► 682, 283.			

			res	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	_	Х
6	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	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V .	10	х	
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			
í	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
í	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	11 b		Х
(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.	11 c		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 reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d	х	
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
1	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.	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	х	
į	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 and XII is optional	12 b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ı	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		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		Х
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		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
	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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
١	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the X United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 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 Х 22 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 Х Х 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х 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 X 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or Х disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II. 26 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 Х 27 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) X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Х Schedule L, Part IV . 28b . . . 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 Х 29 X 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 Х 30 contributions? If 'Yes,' complete Schedule M X Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II. 32 Х 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 Х 33 Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 Х X 35 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a **b** If 'Yes' to line 35a, 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2 36 X Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI Х

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Х Form 990 (2012)

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197

Note. All Form 990 filers are required to complete Schedule O.

Form **990** (2012)

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 1 a b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming 1 c (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State ments, filed for the calendar year ending with or within the year covered by this return. . . 2 b b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions) X 3 a 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O 3 Ь 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a X financial account in a foreign country (such as a bank account, securities account, or other financial account)? **4** a **b** 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. X 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 b c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?... 50 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Х solicit any contributions that were not tax deductible as charitable contributions? 6 a b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were 6 b not tax deductible? Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Х 7 a services provided to the payor? 7 b b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Х 7 c d If 'Yes,' indicate the number of Forms 8282 filed during the year 7 d X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 e X f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 71 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 7 g as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C7 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business 8 holdings at any time during the year? 9 Sponsoring organizations maintaining donor advised funds. 9 a a Did the organization make any taxable distributions under section 4966? 9 b b Did the organization make a distribution to a donor, donor advisor, or related person? 10 Section 501(c)(7) organizations. Enter: 10 a 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 11 a a 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) 11 b 12a Section 4947(a)(1) non - exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12 a b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a is the organization licensed to issue qualified health plans in more than one state? 13 a 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 13b c Enter the amount of reserves on hand . 13c X 14 a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O 14b

Pa	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for	r		
	a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chang Schedule O. See instructions.	jes ii	1	
	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1:	a Enter the number of voting members of the governing body at the end of the tax year 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	,		
1	Enter the number of voting members included in line 1a, above, who are independent		,	
2	The state of the s	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7	a 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?	7 a		х
٠١	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.			
;	a The governing body?	8 a	Х	<u> </u>
	Each committee with authority to act on behalf of the governing body?	8ь	X	ļ
	Is there any officer, director or 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		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue C	ode.		N ₂
10	a Did the organization have local chapters, branches, or affiliates?	10 a	Yes	No X
		10 4		<u> </u>
	b 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?	10 Ь		
		11 a	Х	
	$_{ m b}$ Describe in Schedule O the process, if any, used by the organization to review this Form 990 $$ See <code>Schedule O $$</code>	•		لننا
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
,	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done See Schedule Q .	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	X	<u> </u>
14	Did the organization have a written document retention and destruction policy?	14	Λ.	-
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?			
		15 a	Х	<u> </u>
	b Other officers of key employees of the organization See Schedule 0	15 b	Х	. ,
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)			
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16 b]
Sec	ction C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available. Check all that apply.	aılabl	e for	public
	Own website X Another's website X Upon request Other (explain in Schedule O)			
19	the public during the tax year. See Schedule O	ble to		
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization			
	JEFF SHORE, CPA 1131 BOONVILLE SPRINGFIELD MO 65802 417-877-0505		. _	

Form 990 (2012)	ECITATO A TECAT	E/OD	SPRINGFIELD	סווסו דר	CCHOOT C
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- 1 a 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

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

	T			(C	;)	-				
(A) Name and Title	(B) Average hours per week (list	one bo	ox, ur	iless p id a d	oerso	k more t on is bot or/truste	h an e)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other compensation
	any hours for related organiza- trons below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	from the organization and related organizations
(1) JENNIFER HENDRICKSON	1									
Director	0	Х					į .	0.	0.	0.
(2) BRENT BALDWIN	11									
Director	0	_ x_						0.	0.	0.
(3) TRACY BARNAS	22									
Past President	0	X		X				0.	0.	0.
(4) STEVE NURNBERG	2									
President Elect	0	X		X				0.	0.	0.
(5) JEFF SHORE	2									
Treasurer	0	X		Х				0.	0.	0.
(6) MARGARET SWANGO	1_1_									
Director	0	X						0.	0.	0.
(7) TYLER HEDDEN	11								ļ	
Director	0	X						0.	0.	0.
(8) DWAYNE FULK	2	1							j	1
<u>Secretary</u>	0	X		Х			$ldsymbol{ldsymbol{ldsymbol{eta}}}$	0.	0.	0.
(9) SCOTT BRATCHER	11						i			
Director	0	X						0.	0.	0.
(10) ERIN DANASTASIO	1_1_									
Director		X						0.	0.	0.
(11) KATY TYNES	11									
<u>Director</u>	0	X						0.	0.	<u> </u>
(12) JANA HANSEN	1									
Director	0	X					<u> </u>	0.	0.	<u> </u>
(13) ANNE LINERS BRETT	11]			
Director	0	X		_				0.	0.	<u> </u>
(14) LESLIE GRITZMAKER	1			1						
Director	0	X						0.	0.	0.

, and the second	(B)			(0	;)	,		3			- (00.	
(A) Name and title	Average hours per week	off:	, unle	check ess pe	erson	than is both or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from related organizations	amo	(F) stimated unt of ot	her
	(list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	org an	npensation the rom the lanization d related anization	n d
(15) JOSEPH REID Director	$-\frac{1}{0}$	х						0.	0.			0.
(16) MICHELE OSBORN Director	$-\frac{1}{0}$	Х						0.	0.			0.
(17) KERAN LEMONS Director	$-\frac{1}{0}$	х						0.	0.			0.
(18) KATHY STEINBERG	$-\frac{1}{0}$							0.1	0.			0.
Director (19) DAVID ROSS	_2_	X		v						ļ		
President (20) EMILY KEMBELL	$-\frac{1}{2}$	X		<u>X</u>				0.	0.			0.
Director (21)	0	Х						0.	0.	<u> </u>		0.
(22)		-							 ,			
(23)								ļ				
(24)										ļ		
(25)				-								
1 b Sub-total	<u>. </u>	—				!	•	0.	0.			0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)	1 A .						A	0.	0.		•	0.
2 Total number of individuals (including but not limited to from the organization ► 0	those li	sted	abov	/e) v	vho	receiv	ved	more than \$100,00	0 of reportable com	pensatio	1	
3 Did the organization list any former officer, director	or true	too	kov	Amı	nlov		ır bı	ahest compensate	ed employee		Yes	No
on line 1a ² If 'Yes,' complete Schedule J for such 4 For any individual listed on line 1a, is the sum of r	ındıvıdu	al							•	3		Х
the organization and related organizations greater such individual									10111	4		X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	compen comple	satio te Sc	n fre hea	om a lule	any <i>J fo</i>	unre r suc	late h p	d organization or erson	ındıvıdual	5		X
Section B. Independent Contractors 1 Complete this table for your five highest compensations.	ated inde	epen	dent	cor	ntra	ctors	tha	t received more th	nan \$100,000 of			
compensation from the organization Report compensation (A)		the ca	alen	dar y	/ear	endır	ng v	(B)		((()	
Name and business addre								Description o	ii services	Compe		
					***		_					
2 Total number of independent contractors (including bu		ted to	tho	se li	stec	labov	ve) v	who received more	than			
\$100,000 in compensation from the organization	0										`	

. ai	Check if Schedule O contains a response to any ques	stion in this Part VIII .			
_		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
E E	1 a Federated campaigns 1 a			***********	
돌히	b Membership dues . 1b				
Ş.Ş	c Fundraising events . 1c		j		
병혈	d Related organizations				
SIS	e Government grants (contributions) 1 e	1			
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above . 1f 756,892	<u>.</u>			
A S	g Noncash contributions included in lns 1a-1f: \$				
<u>щ</u>	h Total. Add lines 1a-1f	756,892.			
Ē	Business Code				
Æ	2a				
JČE	b				
EB	d		-	-	
8	<u> </u>			••	
GR/	f All other program service revenue				
8	g Total. Add lines 2a-2f	•			1
	3 Investment income (including dividends, interest and		-	 	
	other similar amounts)	64,682.			64,682.
	4 Income from investment of tax-exempt bond proceeds	•			1.
	5 Royalties	<u> </u>			<u> </u>
	(i) Real (ii) Personal	_			
	6a Gross rents				
	b Less rental expenses				
	c Rental income or (loss)				_
	d Net rental income or (loss) (i) Securities (ii) Other				
	7 a Gross amount from sales of				, , ,
	assets other than inventory 23, 244. 432, 100	<u>-</u>			
	b Less cost or other basis and sales expenses 432, 100				
		-			
	c Gain or (loss) 23,244.	23,244.			23,244
		23,244.			23,244
当	8a Gross income from fundraising events (not including \$				
OTHER REVENUE	of contributions reported on line 1c)				,
E	See Part IV, line 18				
单	b Less direct expenses b				
5	c Net income or (loss) from fundraising events	•			
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less direct expenses b	T			
	c Net income or (loss) from gaming activities	•			
	10a Gross sales of inventory, less returns				
	and allowances a				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory .	P			
	Miscellaneous Revenue Business Code			.	<u> </u>
	11a				
	D	_ 			
	d All other revenue				
	d All other revenue. e Total. Add lines 11a-11d	•			- -
	12 Total revenue. See instructions	844.818	0		87.926

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response to any question in this Part IX (D) Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Program service Management and Fundraising **expenses** general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 422,997 422,997 Grants and other assistance to individuals in the United States. See Part IV, line 22. 170,354 170,354 Grants and other assistance to governments. 3 organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 65,000 32,500 19,500 13,000. 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. Other salaries and wages 85,041 20,020 23,837 41,184. Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Payroll taxes 11,707 4,098 3,381 4,228. Fees for services (non-employees) a Management **b** Legal 9,560 9,560 c Accounting **d** Lobbying e Professional fundraising services. See Part IV, line 17 30,762 30,762 f Investment management fees g Other (If line 11g amt exceeds 10% of line 25, column (A) amt, list line 11g expenses on Sch O) 12 Advertising and promotion 15,516 15,516 Office expenses Information technology Royalties 15 16 Occupancy 17 1,291 1,291 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 22 Depreciation, depletion, and amortization. 2,715 2,715 23 8,925. 8.925 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 24 expenses on Schedule O.) 22,754 22,754 a TEACHER APPRECIATION 5,659 4,209 1,450. b Printing and Publications 4,876 4,876 c Office expense 4,050 4,050. d SUPPLIES e All other expenses 10,420 3,099. 7,321 25 Total functional expenses. Add lines 1 through 24e 871,627 682,283 106,817 82,527. 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 ► ☐ if following SOP 98-2 (ASC 958-720)

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances.

Part X **Balance Sheet** Check if Schedule O contains a response to any question in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 37,023 22,907. 2 2 Savings and temporary cash investments. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 Loans and other 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) Complete Part II of Schedule L 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 5,931 9 332 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule \bar{D} 10 a 38,947 10b 2,434 10 c 105. b Less accumulated depreciation 38,842 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11. 14 Intangible assets 14 15 Other assets. See Part IV, line 11. 3,626,558 4,297,267 15 Total assets. Add lines 1 through 15 (must equal line 34) 3,671,946 16 4,320,611 16 17 Accounts payable and accrued expenses 17 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 24 24 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 of Schedule D 25 184,010 602,100. 26 602,100 184,010 26 Total liabilities. Add lines 17 through 25 X and complete Organizations that follow SFAS 117 (ASC 958), check here N E T lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 273,005 351,550. 28 837,601 963,217. Temporarily restricted net assets 29 Permanently restricted net assets 2,377,330 2,403,744. õ Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34. FUND 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund

BAA

33

34

4,320,611. Form **990** (2012)

3,718,511.

32 33

34

3,487,936

3,671,946

	n 990 (2012) FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOL5	43-	<u>1560366</u>		Pa	ige 12
Pai	rt XI Reconciliation of Net Assets					_
	Check if Schedule O contains a response to any question in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12).		1	8	44,8	<u>318.</u>
2	Total expenses (mast equal / art m) estamm (y) mis may		2	8	71,6	<u> 527.</u>
3	Revenue less expenses. Subtract line 2 from line 1.		3	_	26,8	<u>309.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		4	3,4	87,9	€36.
5	Net unrealized gains (losses) on investments		5	2	57,3	384.
6	Donated services and use of facilities		6			
7	Investment expenses		7			
8	Prior period adjustments		8			
9	Other changes in net assets or fund balances (explain in Schedule O).		9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,		10			
_	column (B))	·	10	3, 1	18,5	<u>, 11 </u>
Pai	rt XII Financial Statements and Reporting					_
	Check if Schedule O contains a response to any question in this Part XII .				•	Щ.
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				٠	-
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			· .	* * .	
2 8	a Were the organization's financial statements compiled or reviewed by an independent accountant?			2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or separate basis, consolidated basis, or both	reviewe	ed on a	, ~,	ر مر د د د د	
	Separate basis Consolidated basis Both consolidated and separate basis					
1	b Were the organization's financial statements audited by an independent accountant?			2 b	_X	L
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a basis, consolidated basis, or both	separa	te	rtis r		. 1
	X Separate basis Consolidated basis Both consolidated and separate basis			شندات	<u> </u>	نست
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?		•	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.					, ,
3 :	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	Single		3 a		х
!	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired audi	ıt	3 ь		
BAA				Form	990	(2012)

SCHEDULE A (Form 990 or 990-EZ)

Total

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOL S 43-1560366 Part I 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) 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.) 3 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 4 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 5 170(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 7 in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities 9 related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% 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). An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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. Type III - Non-functionally integrated Type II C Type III - Functionally integrated |Type I By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or if the organization received a written determination from the IRS that is a Type I, Type II 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? g Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) 11 g (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s) h (iii) Type of organization (described on lines 1-9 above or IRC section (vii) Amount of monetary (vi) Is the rganization in column (i) (i) Name of supported organization (ii) EIN (iv) Is the (v) Did you notify the organization in organization in column (i) listed in the organization in column (i) of your support (see instructions)) your governing document? support organized in the Yes No Yes No Yes No (A) (B) (C) (D) (E)

Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
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).		,					
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support				,			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(1) Total
7	Amounts from line 4.							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		_					
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					1		
11	Total support. Add lines 7 through 10				•	-		
12	Gross receipts from related activ	vities, etc (see ins	tructions)		•	1	2	
13	First five years. If the Form 990 is organization, check this box and		n's first, second, th	iird, fourth, or fifth t	tax year as a section	on 501(c)(3)		▶ []
Sec	tion C. Computation of Pu							
14				ne 11, column (f))		1	4	<u>%</u>
	Public support percentage from			•	•	· —	5	<u> </u>
16 a	33-1/3% support test — 2012. If and stop here. The organization	the organization qualifies as a pu	did not check the blicly supported o	box on line 13, a organization	nd the line 14 is 3	33-1/3% or mo	re, check t	his box
t	33-1/3% support test — 2011. If and stop here. The organization	the organization of qualifies as a pu	did not check a bo blicly supported o	ox on line 13 or 16 organization	5a, and line 15 is	33-1/3% or mo	re, check	this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance	s' test, check this	box and stop he i	re. Explain in F	art IV hov	v ► □
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- d-circumstances'	and-circumstance test The organiz	s' test, check this ation qualifies as	box and stop he a publicly support	r e. Explain in F ted organizatio	art IV hov n	w the ▶
18	Private foundation. If the organi	zation did not che	eck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see	instructio	ns 🟲 📗

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	tion A. Public Support						
Calen	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any unusual grants ')	1 700 063	744 016	CCA F01	612 770	756 000	4 470 451
2	Gross receipts from admis-	1,700,063.	744,216.	664,501.	612,779.	756,892.	4,478,451.
	sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge	24,000.	24,000.	24,000.	24,000.	11,062.	107,062.
6	Total. Add lines 1 through 5	1,724,063.	768,216.	688,501.	636,779.	767,954.	4,585,513.
7 a	Amounts included on lines 1, 2, and 3 received from disqualified persons	200,952.	9,185.	217,731.	0.	0.	427,868.
t	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	0.	0.	0.	0.	0.	0.
,	Add lines 7a and 7b	200,952.	9,185.	217,731.	0.	0.	427,868.
	Public support (Subtract line 7c from line 6.)		4,157,645.				
Sec	tion B. Total Support						
Calen	dar year (or fiscal yr beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 6	1,724,063.	768,216.	688,501.	636,779.	767,954.	4,585,513.
	d Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.	99,539.	65,064.	99,253.	137,324.	87,926.	489,106.
c	Add lines 10a and 10b	99,539.	65,064.	99,253.	137,324.	87,926.	489,106.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .						0.
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).						0.
	Total support. (Add Ins 9, 10c, 11, and 12)		833,280.	787,754.	774,103.	855,880.	5,074,619.
14	First five years. If the Form 990 organization, check this box and	is for the organiza stop here		d, third, fourth, or	fifth tax year as a	section 501(c)(3	3)▶ □
Sec	tion C. Computation of Pul		ercentage				
	Public support percentage for 20			e 13, column (f))		. 15	81.93 %
	Public support percentage from 2					16	68.50 %
Sec	tion D. Computation of Inv	esuneni incon					
<u>3ec</u>	Investment income percentage for			by line 13, colun	nn (f))	. 17	9 64 %
	Investment income percentage f	or 2012 (line 10c,	column (f) divided		nn (f))	17	9.64 % 7.55 %
17 18		or 2012 (line 10c, rom 2011 Schedul	column (f) divided e A, Part III, line 1 did not check the l	l7. box on line 14. ar	nd line 15 is more	than 33-1/3%, a	7.55 %
17 18 19 a	Investment income percentage finestment incom	or 2012 (line 10c, rom 2011 Schedul the organization of this box and stop	column (f) divided e A, Part III, line i did not check the l o here. The organi	17 . box on line 14, ar zation qualifies as	nd line 15 is more s a publicly suppo	than 33-1/3%, arrted organization	7.55 % and line 17

Schedule A	(Form 990 or 9	90-EZ) 2012	FOUN	DATION	FOR S	PRINGF.	TETD F	SOBPIC	SCHOOL	<u> 3 43-15</u>	60366	Page 4
Partily .	Suppleme Part II, line (See instru	ntal Informe 17a or 13 actions).	nation. C 7b; and P	omplete art III, III	this pai ne 12. A	rt to pro Also com	vide the	e explar his part	nations r for any	equired by additional	y Part II, line information.	10;
				- -					- -			
									-			
												
				~								
				-								
									- -			
						-			-		- 	
												
										~		

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions. Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

OUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS	43-1560366
the organization answered 'Yes' to Form 990, Part IV, line	er Similar Funds or Accounts. Complete if
(a) Donor advised fu	unds (b) Funds and other accounts
1 Total number at end of year	
2 Aggregate contributions to (during year)	
3 Aggregate grants from (during year) .	
Aggregate value at end of year	
Did the organization inform all donors and donor advisors in writing that the are the organization's property, subject to the organization's exclusive legal c	assets held in donor advised funds control? Yes No
Did the organization inform all grantees, donors, and donor advisors in writing for charitable purposes and not for the benefit of the donor or donor advisor, impermissible private benefit?	g that grant funds can be used only or for any other purpose conferring Yes No
art II Conservation Easements. Complete if the organization ar	nswered 'Yes' to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the organization (check all that	at apply)
Preservation of land for public use (e.g., recreation or education)	Preservation of an historically important land area
Protection of natural habitat	Preservation of a certified historic structure
Preservation of open space	
Complete lines 2a through 2d if the organization held a qualified conservation contr last day of the tax year	
	Held at the End of the Tax Yea
a Total number of conservation easements	2 a
b Total acreage restricted by conservation easements	2 b
${f c}$ Number of conservation easements on a certified historic structure included in	n (a) 2 c
d Number of conservation easements included in (c) acquired after 8/17/06, and structure listed in the National Register	2d
Number of conservation easements modified, transferred, released, extinguished, o	r 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 and enforcement of the conservation easements it holds?	Tes I No
Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conserva	
Amount of expenses incurred in monitoring, inspecting, and enforcing conservation \$ \\$	easements during the year
Does each conservation easement reported on line 2(d) above satisfy the requand section 170(h)(4)(B)(ii)?	Yes No
In Part XIII, describe how the organization reports conservation easements in its reinclude, if applicable, the text of the footnote to the organization's financial strongerization easements.	venue and expense statement, and balance sheet, and tatements that describes the organization's accounting for
art III Organizations Maintaining Collections of Art, Historical 7 Complete if the organization answered 'Yes' to Form 990,	Freasures, or Other Similar Assets. Part IV, line 8.
1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to reart, historical treasures, or other similar assets held for public exhibition, education in Part XIII, the text of the footnote to its financial statements that describes	i, or research in furtherance of public service, provide,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report historical treasures, or other similar assets held for public exhibition, education, or following amounts relating to these items	rt in its revenue statement and balance sheet works of art, research in furtherance of public service, provide the
(i) Revenues included in Form 990, Part VIII, line 1	▶\$
(ii) Assets included in Form 990, Part X	▶\$
If the organization received or held works of art, historical treasures, or other simila amounts required to be reported under SFAS 116 (ASC 958) relating to these	ar assets for financial gain, provide the following enterns.
a Revenues included in Form 990, Part VIII, line 1	▶ \$
h Assets included in Form 990, Part X	▶ \$

Schedule D (Form 990) 2012 FOUND Part III Organizations Maintal	OATION FOR SE	RINGFIELD PUB s of Art, Historic	LIC SCHOOLS al Treasures, or (43-1560 Other Similar Asso)366 Page 2 ets (continued)
3 Using the organization's acquisition items (check all that apply):	 				
a Public exhibition		d Loan or ex	change programs		
b Scholarly research		e Other			
c Preservation for future gener	ations				
4 Provide a description of the organiz Part XIII		d explain how they furt	her the organization's e	exempt purpose in	
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or receiv	e donations of art, his d as part of the orgar	storical treasures, or elization's collection?	other similar assets	Yes No
Part IV Escrow and Custodial Arra reported an amount or	angements. Compl n Form 990, Par	ete if the organization t X, line 21.	n answered 'Yes' to F	Form 990, Part IV, line	e 9, or
1 a Is the organization an agent, trus on Form 990, Part X?				assets not included	Yes No
b If 'Yes,' explain the arrangement	in Part XIII and cor	nplete the following to	able:		^
				 	Amount
c Beginning balance	• • •	• • •	• •	1c	
d Additions during the year		•		1 d	
e Distributions during the year		• • •	•	16	
f Ending balance .2 a Did the organization include an a	Impunt on Form 990	Part Y line 212	•	[]	Yes No
b If 'Yes,' explain the arrangement			has been provided in	n Part XIII	」' ' '' ⊢'''
bil tes, explain the arrangement	III Fall Alli Oneck	nere ii tiic explantion	nas been provided in	TT art Am	
Part V Endowment Funds. C	omplete if the o	rganization answe	ered 'Yes' to Forn	n 990. Part IV. line	e 10.
Tart V Endowment and S. O	(a) Current	(b) Prior year	(c) Two years	(d) Three years	(e) Four years
1 a Beginning of year balance	3,452,893			3,718,786.	1,539,572.
b Contributions	586,885		514,255		-247,679.
	3,0,000				
c Net investment earnings, gains, and losses	334,608	-94,696	597,059	. 324,579.	873,472.
d Grants or scholarships .	594,806	607,312	698,461	1,072,764.	200,000.
Other expenditures for facilities and programs	56,618			0.	63,051.
f Administrative expenses	118,039	78,039	82,787	65,028.	3,718,783.
g End of year balance.	3,604,923	3,452,893	3,772,064	3,441,998.	3,718,783.
2 Provide the estimated percentage	e of the current yea	end balance (line 1ç	, column (a)) held as	,	· -
a Board designated or quasi-endowm	ent ►	6.60 %			
b Permanent endowment ▶	66.68 %				
c Temporarily restricted endowmer		<u>72</u> %			
The percentages in lines 2a, 2b,	and 2c should equa	1 100%			
3 a Are there endowment funds not in to organization by.	he possession of the	organization that are h	eld and administered fo	or the	Yes No
(i) unrelated organizations					3a(i) X
(ii) related organizations			•	•	3a(ii) X
b If 'Yes' to 3a(II), are the related of	organizations listed	as required on Sched	ule R? .		3b
4 Describe in Part XIII the intended	d uses of the organi	zation's endowment f	unds. See Part	XIII	
Part VI Land, Buildings, and	Equipment. See				
Description of property		st or other basis (investment)	b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land					
b Buildings					
c Leasehold improvements					
d Equipment			38,947.	38,842.	105.
e Other					
Total. Add lines 1a through 1e (Colum	nn (d) must equal Fo	orm 990, Part X, colu	mn (B), line 10(c))	<u> </u>	105.
BAA				Schedu	ile D (Form 990) 2012

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

See Part XIII

	-156036	6 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn	
1 Total revenue, gains, and other support per audited financial statements	1	1,076,852.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12.		
a Net unrealized gains on investments		
b Donated services and use of facilities . 2b		
c Recoveries of prior year grants]	
d Other (Describe in Part XIII) . 2d		
e Add lines 2a through 2d	2 e	257,384.
3 Subtract line 2e from line 1	3	819,468.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	_,	
b Other (Describe in Part XIII.) . See Part. XIII . 4b 25,350.		
c Add lines 4a and 4b.	4 c	25,350.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	844,818.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
1 Total expenses and losses per audited financial statements .	1	846,277.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25		
a Donated services and use of facilities 2 a		
b Prior year adjustments . 2 b	1	
c Other losses 2c	1	
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2 e	
3 Subtract line 2e from line 1	3	846,277.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.) See Part XIII. 4b 25,350.		
c Add lines 4a and 4b.	4 c	25,350.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	871,627.
Part XIII Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any	, lines 1b an additional ii	d 2b; Part V, nformation
Part V, Line 4 - Intended Uses Of Endowment Fund		
ENDOWMENT FUNDS ARE HELD FOR THE BENEFIT OF CURRENT AND PRIOR STUDENT	rs of sp	RINGFIELD
PUBLIC SCHOOLS		
Part X - FIN 48 Footnote		
The Foundation was organized on September 24, 1990, and is exempt from	om_incom	e_taxes
under Section 501(c)(3) of the Internal Revenue Code as provided by a	a determ	ination
letter dated April 23, 1991, from the Internal Revenue Service. The	Foundat	ion is
not classified as a private foundation.		
BAA	Schedule D	(Form 990) 2012

Parxill Supplemental Information (continued)	45-1500500	r age 3
Part X - FIN 48 Footnote (continued)		
The most significant tax position of the Foundation is its asser		
exempt from income taxes. Other significant tax positions inclu	ude its determina	tion
of whether any amounts are subject to unrelated business tax (UI	BIT). Management	has
determined the Foundation had no activities subject to UBIT in t	the years ended J	une
30, 2013 or 2012. All significant tax positions have been cons	idered by managem	ent
and it has determined that it is more likely than not that all t	tax_positions_wou	ıld
be sustained upon examination by taxing authorities.		
The Foundation is required to file Form 990 (Return of Organizat	tion Exempt from	
Income Tax) which is subject to examination by the Internal Reve	enue Service (IRS) up
to three years from the extended due date of the tax return. The	he Forms 990 for	2010
through 2012 are open to examination by the IRS as of June 30, 2	2013.	

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

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

2012

OMB No 1545-0047

7107	Open to Public Inspection
	Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

Employer identification number X 43-1560366 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOL S Name of the organization

ž

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. See Part IV 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SPRINGFIELD PUBLIC SCH GOLS 1359 E ST. LOUIS SPRINGFIELD. MO 65802	44-6005539 501 (c) (3	501 (c) (3)	446,835.	0			PROJECT BASED AND CURRICULUM ENHANC
(3)							
(4)		,					
-							
<u></u> ω							
(8)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	3) and government or	ganizations listed i	n the line 1 table				, - 1

Schedule I (Form 990) (2012)

TEEA3901L 11/30/12

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations listed in the line 1 table

Page 2

Schedule I (Form 990) (2012) FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOL. S. 43-1560366

Part III can be duplicated if additional space is needed.

(d) Amount of (e) Method of valuation (book, non-cash assistance FMV, appraisal, other)	•	•						Part I, line 2, Part III, column (b), and any other		OUT STANDARD GRANT APPLICATIONS WHICH MUST	GUND MORE THAN	3 GRANTS GO	ND VOLUNTEERS.	THE POSITION	INAL GRANT	OS WERE SPENT.	APPROVED BY THE FOUNDATION. IN SOME CASES		SCHOLARSHIPS ARE ALSO REVIEWED AND AWARDED
								on required in Pa	1 1 1 1 1 1 1 1	T APPLICATIO	ANTS THAT FU	ATION. THE	MEMBERS AND	FUNDED BY I	ERS_HAVE_FIN	OW THE FUNDS	FOUNDATION.	ALSO REVIEW	
(c) Amount of cash grant	8,800.	147,600.						provide the information required in Part I, line	unds in U.S.	STANDARD GRAN	OF HIGH IMPACT GRANTS THAT FUND MORE THAN	OVE THE APPLIC	FOUNDATION BOARD MEMBERS AND VOLUNTEERS.	HEN RANKED AND	GRANTS. TEACH	TCOMES AND SHOW HOW THE FUNDS WERE SPENT.	PROVED BY THE	HOLARSHIPS ARE	
(b) Number of recipients	11	37							g <u>Use of Grants F</u>			IPAL MUST APPR	- 1	GORY AND ARE I	OVES ALL FINAL	RATE THE OUTCO			1
(a) Type of grant or assistance	1 TEACHER AWARDS	2 SCHOLARSHIPS	3	4	3	9	7	Partive Supplemental Information. Complete this part to additional information.	Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.	SCHEDULE I, PART I, LINE 2: TEACHERS FILL	BE APPROVED BY THE PRINCIPAL. IN THE CASE	ONE SCHOOL, EACH SCHOOL'S PRINCIPAL MUST APPROVE THE APPLICATION. THE GRANTS GO	BEFORE AN ALLOCATIONS COMMITTEE MADE UP OF	GRANTS ARE SORTED BY GRANT CATEGORY AND ARE THEN RANKED AND FUNDED BY THE POSITION	THEY ARE RANKED. THE BOARD APPROVES ALL FINAL GRANTS. TEACHERS HAVE FINAL GRANT	REPORT FORMS WHICH MUST DEMONSTRATE THE OU	ANY DEVIATION OF FUNDS SPENT MUST FIRST BE	THERE ARE SITE VISITS FROM THE FOUNDATION.	1 1 1

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545 0047

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

Open to Public

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS	43-1560366
Form 990, Part VI, Line 11b - Form 990 Review Process	
THE FORM 990 WILL BE REVIEWED BY THE TREASURER PRIOR TO FILING.	A COPY OF THE FORM
990 WILL BE PROVIDED TO ALL BOARD MEMBERS FOR COMMENTS AND QUES	TIONS PRIOR TO
FILING.	·
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	flicts
THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORC	CES COMPLIANCE WITH
THE WRITTEN CONFLICT OF INTEREST POLICY AS A PART OF BOARD MEET	TINGS AND RETREATS.
FOLLOW UP WITH INDIVIDUAL BOARD MEMBERS IS COMPLETED AS NECESSA	ARY.
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers &	k Key Employees
THE FOUNDATION'S EXECUTIVE COMMITTEE PERFORMS AN ANNUAL REVIEW	OF THE FOUNDATION'S
STAFF AND RECOMMENDS AN APPROPRIATE LEVEL OF COMPENSATION BASED	UPON PERORMANCE AND
COMPARABLE DATA. THIS PROCESS IS APPROVED BY THE BOARD AND DOCU	MENTED IN THE
FOUNDATION'S MINUTES.	
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
THE FOUNDATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLI	CY, AND FINANCIAL
STATEMENTS ARE AVAILABLE FOR PUBLIC INSPECTION AT THE FOUNDATION	ON'S OFFICE. AN
ANNUAL REPORT IS PREPARED AND CIRCULATED THROUGH THE COMMUNITY.	

Form 8868

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

File a separate application for each return.

OMB No. 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS 43-1560366 Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) File by the due date for 1131 BOONVILLE filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions SPRINGFIELD, MO 65802 Enter the Return code for the return that this application is for (file a separate application for each return). 01 Application Is For Return Application Return Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► <u>JEFF_SHORE</u>, <u>CPA</u> Telephone No ► 417-877-0505 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 2/15 , 20 14 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 X tax year beginning 7/01 , 20 12 , and ending 6/30 , 20 13 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3 a |\$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3Ы\$ 0. c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3 c |\$ 0.

payment instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

2012 Schedule D, Part XIII - Supplemental Information						
FOUNDATION FOR SPRINGFIELD PUBLI	іс ѕсно	OOLS		43-156036		
Schedule D, Part XI, Line 4b Other Revenue Included On Form 990 But Not Included In F/S						
DIRECT DONOR BENEFITS NETTED TO REVENUE IN FINANCIAL STATEMENTS BUT INCLUDED IN XEXPENSES IN FORM 990		 	\$	25,345. 3. 2. 25,350.		
Schedule D, Part XII, Line 4b Other Expenses Included On Form 990 But Not Included In F/S			6	25 245		
DONOR BENEFITS NETTED TO REVENUE IN FINANCIAL STATEMENTS BUT INCLUDED IN XEXPENSES IN FORM 990		Total	\$	25,345. 3. 2. 25,350.		

2012

Schedule I, Part IV - Supplemental Information

Page 3

FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS

43-1560366

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

(FOR DISTRICT-WIDE SCHOLARSHIPS). SCHOLARSHIPS ARE AWARDED ON A COMPETITIVE/NEED BASIS TO GRADUATING SENIORS OF THE SPRINGFIELD PUBLIC SCHOOLS. SCHOLARSHIP RECIPIENTS PROVIDE THE OFFICE WITH THE REQUIRED COLLEGE INFORMATION. THE FOUNDATION WORKS WITH THE VARIOUS COLLEGE AND UNIVERSITY FINANCIAL REPRESENTATIVE TO PAY THE SCHOLARSHIP EACH SEMESTER. SCHOLARSHIP RECIPIENTS ARE MONITORED TO ENSURE THEY MAINTAIN THE REQUIREMENTS OF THE SCHOLARSHIP (I.E GRADE POINT AVERAGE, ATTENDANCE, ETC).

. . . . **Federal Worksheets** Page 1 2012 FOUNDATION FOR SPRINGFIELD PUBLIC SCHOOLS 43-1560366 Form 990, Part IX, Line 24e **Other Expenses** (D) (A) (B) (C) Management Program Total <u>Services</u> & General Fundraising 659. 659. BOARD EXP 1,800. 3,099. 1,800. **DUES** 3,099. **MEALS** 4,023. 4,023. Postage and Shipping 650. 650. SOFTWARE 1<u>89.</u> 189. Training 7,321. \$ 10,420. \$ 3,099. Total \$ Schedule A, Part III, Line 7a Received From Disqualified Persons 2012 Persons