Form **990** 

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service		ecurity numbers on this form as /Form990 for instructions and t		Open to Public Inspection
A For the 2018 calen		UL 1, 2018 and er	nding JUN 30, 2019	
	of organization		D Employer identifica	tion number
Address change RDUC	CATION FOUNDATION OF	F BLOOMINGTON		69004
Name change Doing	business as		41-15	68904
	er and street (or P.O. box if mail is not del 5. WEST 88TH STREET.		oom/suite E Telephone number 952-3	88-7481
				Yes No
<u> </u>	ı · -	<u></u>		
4				
-				
<del>-</del>				
	•			
	·			
	·			

<b>IPa</b>	art III  Statement of Program Service Accomplishments
11.0	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission
•	THE EDUCATION FOUNDATION OF BLOOMINGTON'S PURPOSE IS TO HELP MEET
	EDUCATIONAL NEEDS OF STUDENTS OF BLOOMINGTON PUBLIC SCHOOLS
	EDUCATIONAL NEEDS OF STUDENTS OF BLOOMINGTON TOBELC BENOODS
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes." describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported
4a	17.050
	SCHOLARSHIPS - SCHOLARSHIPS ARE AWARDED TO SENIORS FROM JEFFERSON AND
	KENNEDY HIGH SCHOOLS AT ACCADEMIC HONORS EVENTS FOR THE GRADUATING
	CLASS.
	11 991
4b	
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS, TEACHERS, AND PARENTS.
4b	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS, TEACHERS, AND PARENTS.
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS
	INNOVATION GRANTS - PROJECTS THAT ADDRESS THE NEEDS OF STUDENTS,  TEACHERS, AND PARENTS.  (Code) (Expenses \$ 23,055. including grants of \$) (Revenue \$)  CHILDREN'S FOOD FOR THOUGHT - PROVIDES FREE SCHOOL MEALS FOR STUDENTS

1

Earm.	ann.	(2018)	
i.Oun	990	(2010)	

# EDUCATION FOUNDATION OF BLOOMINGTON

45	( )	1	$\cdot \cap$
41-15689	04	1	. 3

1	Dort IV	Chacklint	4 0		Cabadulas
1	rattiv	Checklist of	JIN	quirea	Schedules

2	If "Yes," complete Schedule A Is the organization required to co	mplete Schedule B, Schedule of Co	ontributors?		1 X 2 X
	<del></del> -				Marie 4.
				•	
1					
•					
Ĭ			<b>,</b>		
7					L
-					
10 m 100	A judge of the same	Part of the Part o	4'g= <u>-</u> x***-		
<u> </u>					
<b>.</b>					
1					
,					
,					
,					
To Co					
ı					

41	-15	68	904	Page 4	ć
		-		"aye	1

Form 990 (2018)	EDUCATION	FOUNDATION	OF	BLOOMINGTON

Pa	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		ا ا	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	L
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			l
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-F7? If "Ves." complete			

	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 11d See Form 990,	Part X, line 15	
	(a) Description			(b) Book value
(1)				-
(2)				
(3)				
(4)				
(5)			·	
(6)		<u></u>		
(7)				
(8)				
(9)				
Total. (Col	lumn (b) must equal Form 990. Part X. col. (B) line 15.)			
Part X	Other Liabilities.			
	Complete if the organization answered "Yes" on Form 990, Pa	rt IV, line 11e or 11f See For	n 990, Part X, line 25_	
1.	(a) Description of liability	(b) Book value		

1. (a) Description of Hability (b) Book value

Form	990 (2018) EDUCATION FOUNDATION OF BLOOMINGTON 41-15689	04	Pa	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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" to line 3b, 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	- {	İ	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country	]	1	- 1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
50	Was the organization a party to a prohibited tay shelter transaction at any time during the tay year?	5a	ı	Х

09280914 152046 2097

28 2018.04020 EDUCATION FOUNDATION OF B 2097\_\_\_1

P	m 990 (2018)	EDUCATIO	N FOUNDATION	OF BLOOMINGT	ON 4:	1-1568904 Page
	art VI Governan	ce, Management,	and Disclosure For	each "Yes" response to	lines 2 through 7b below	, and for a "No" response
			e the circumstances, proc		neaule O-See instructions	x X
50	Check if School	ng Body and Man	oonse or note to any line i	n this Part VI	<del></del>	
<u> </u>	odon A. dovernii	ig body and man	agement	<del></del>	· · · · · · · · · · · · · · · · · · ·	Yes No
1	n Fataritko mumbor a	if vioting morehore of th	a navamm <u>e badu akiba a</u>	adalibe teu vanr	ا عوا	23/ 163/10
			· .			
<del></del> -	-					
				<u> </u>		
•	-					
_						
	——————————————————————————————————————					
			· •			
<b></b>						
dn==						
	r					
					•	

Page 7

Check if Schedule O contains a response or note to any line in this Part VII

#### 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.

X Check this box if neither the organization	ation nor any related	orga	nıza	tion	con	npen	sate	ed any current officer, d	rector, or trustee	<del></del>
(A)	(B)			(C Posi				(D)	(E)	(F)
Name and Title	Average		not c	heck I	more	than c		Reportable	Reportable compensation	Estimated amount of
	hours per week	offi	, unie: cer an	ssper dad	rson i irecto	s both r/trust	i an tee)	compensation from	from related	other
	(list any	į						the	organizations	compensation
	hours for	aip				ted		organization	(W-2/1099-MISC)	from the
	related	stee	ruste			pensa		(W-2/1099-MISC)		organization
	organizations below	ual tru	lenoi		e g	t com	١.		l	and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	ey em	Highest compensated employee	Former			Organizations
(1) JOAN BORCHERS	0.00	Ť	==	<u> </u>	-	1	_	<del></del>		
•		X						0.	0.	0.
(2) STEPHEN BARITEAU	0.00									
VICE PRESIDENT		X		<u> </u>	<u> </u>	<u> </u>		0.	0.	0.
(3) ROBERT ERICKSON	0.00							1		
		X			<u> </u>	<u> </u>	_	0.	0.	0.
(4) LES FUJITAKE	0.00	<b> </b>					ŀ			
(5) DIGWIDD GIFLDG		X		-	$\vdash$	╁	-	0.	0.	0.
(5) RICHARD SAFARZ	0.00	x		x				0.	0.	0.
FINANCIAL (6) KAROLYN L. LEE	0.00	<u> </u>		^	$\vdash$	H	├	<u>0.</u>	0.	
(0) KARODIN I. BEE	0.00	x						0.	0.	0.
(7) JANET PLADSON	0.00	1					$\vdash$			
PRESIDENT		X	<u>.                                    </u>	X				0.	0.	0.
(8) MARY MURPHY	0.00									
		X	_		_		_	0.	0.	0.
(9) BARBARA PARRISH	0.00	ļ			l					
		X	├		L	-	ļ	0.	0.	0.
(10) KRISTI WESOLOWSKI	0.00	x						0.	0.	0.
(11) MOLLY LUECK	0.00	^	⊢	┝	┢	-	-		0.	0.
(11) MOBEL BOSCK	0.00	x	l					0.	0.	0.
(12) RAY KNOSS	0.00	<u> </u>	1	1				<del></del>	<del></del>	
,,		x	İ					0.	0.	0.
(13) ANN C. TILLOTSON	0.00		Г							
		x	L	L		L		0.	0.	0.
(14) FLORA TSUKAYAMA	0.00									]
		X	<u> </u>	<u> </u>	L	$oxed{igspace}$	L	0.	0.	0.
(15) TAMRA SIEVE	0.00	4_						_		
	4,7,4	X	ļ	_	<u> </u>	$\vdash$	$\vdash$	0.	0.	0.
(16) WENDY MARCZAK	0.00	۱.,							0.	_
(15) Whore court	0.00	X	┝	├—	⊢	├	$\vdash$	0.	<u> </u>	0.
(17) MARCIE COVAL	0.00	x						0.	0.	0.
	<u>.                                      </u>	ΙV	Щ.	<u> </u>	<u> </u>	Ц_		1 0.	1 0.	Form <b>990</b> (2018)

832007 12-31-18

Form 990 (2018)

Form 990 (2018) EDUCATION FOUNDATION OF BLOCKLING COntinued Part VII Section A Officer Directors Trustees Key Familiares, and Highest Compensated Employees (continued) 41-1568904 Page 8 EDUCATION FOUNDATION OF BLOOMINGTON 22 247

Га	rt VII			ou mata ta any lin	our this Bort VIII			
		Check if Schedule O cont	ains a response (	or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e f g	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribute All other contributions, gifts, gran similar amounts not included about Noncash contributions included in lines Total. Add lines 1a-1f	ts, and ve 1f	82,802. 82,802.	82,802.		,	
Program Service Revenue	2 a b c d e f	All other program service reve		Business Code				
	3	Total. Add lines 2a-2f Investment income (including other similar amounts)	dividends, intere		144.	144.		
	4	Income from investment of tax	k-exempt bond p	roceeds			-	<del></del>
	5	Royalties	6 Parl	G) December				
	p p	Gross rents Less rental expenses Rental income or (loss)	(i) Real	(ii) Personal				
	7 a	Net rental income or (loss) Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		J.		
	c	Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)						
Other Revenue		Groce income from fundraising including \$	of					; ;
)the		Loss direct expenses	b	<u> </u>				
)	9 a	Net income or (loss) from fund Gross income from gaming ac Part IV, line 19	_	•				
		Less direct expenses  Net income or (loss) from gam			<del></del>		<del></del>	
	10 a	Gross sales of inventory, less and allowances	_					
		Less cost of goods sold Net income or (loss) from sale		<b></b>				
		Miscellaneous Revenu		Business Code		- <del></del>		
	11 a			<del></del>				
	b							
	d	All other revenue					-	
	-	Total. Add lines 11a-11d	•	<b></b>				
	12	Total revenue. See instructions		<u> </u>	82,946.	144.	0.	0.
83200	9 12-31							Form <b>990</b> (2018)

Secti	on 501(c)(3) and 501(c)(4) organizations must comp	lete all columns All othe	er organizations must cor	nplete column (A)	
	Check if Schedule O contains a respon				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	47,950.	47,950.		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				<u> </u>
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				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				· · · · · · · · · · · · · · · · · · ·
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management .				<u>.                                    </u>
b	Legal				
	Accounting				
d	Lobbying		<del></del>		
е	Professional fundraising services. See Part IV, line 17	1,662.		1,662.	
f	Investment management fees	1,002.		1,002.	
g	Other (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)				
12	Advertising and promotion	1,672.		1,672.	
13	Office expenses	1,072.		1,072.	
14	Information technology				
15	Royalties				
16	Occupancy Travel				<del> </del>
17 18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			-	<del></del>
20	Interest				··············
21	Payments to affiliates				<del></del>
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line	1			
	24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	INNOVATION GRANTS	44,994.	44,994.		
b	FOOD FOR THOUGHT	23,055.	23,055.		
C	STUDENT SUCCESS STIPEND	22,831.	22,831.		
d	GOLF EVENT	15,354.		15,354.	
е	All other expenses	4,014.	3,164.	850.	
25	Total functional expenses. Add lines 1 through 24e	161,532.	141,994.	19,538.	0.
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 if following SOP 98-2 (ASC 958-720)				

832010 12-31-18

346,033. Form 990 (2018)

346,033.

32

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

422,079.

422,079.

32

33

	200 (2016) EDUCATION POINDATION OF PLOOMINGTON	11.	-1568904	_	10
	1 990 (2018) EDUCATION FOUNDATION OF BLOOMINGTON  IT XI Reconciliation of Net Assets	41.	-1366904	Pag	<sub>ge</sub> 12
	Check if Schedule O contains a response or note to any line in this Part XI				
	Officer in defice die of contains a response of note to any line in this rate At	ГТ			<del></del>
1	Total revenue (must equal Part VIII, column (A), line 12)	11	82	2,9	46.
2	Total expenses (must equal Part IX, column (A), line 25)	2			32.
3	Revenue less expenses. Subtract line 2 from line 1	3			86.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			79.
5	Net unrealized gains (losses) on investments	5			42.
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,				
	column (B))	10	346	0.0	<u>35.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		***		
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		-   -   -   -   -   -   -   -   -	15- 4	* .
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0		- 1	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a	*		1
	separate basis, consolidated basis, or both		· • • • • • • • • • • • • • • • • • • •	1	_ 1
	Separate basis Consolidated basis Both consolidated and separate basis			>.	
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basıs,	8	٠	`,' <b>]</b>
	consolidated basis, or both		,,,'		- 4
	Separate basis Consolidated basis Both consolidated and separate basis				٠, ٠
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audıt,			
	review or compilation of its financial statements and selection of an independent accountant?		1 201	1	

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

Х

Form **990** (2018)

Act and OMB Circular A-133?

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

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No 1545-0047

Open to Public Inspection

Name of the organization

EDUCATION FOUNDATION OF BLOOMINGTON

**Employer identification number** 

41-1568904 Reason for Public Charity Status (All organizations must complete this part ) See instructions Part I The organization is not a private foundation because it is (For lines 1 through 12, 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 (Form 990 or 990-EZ)) 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 name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 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). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. \_\_\_\_\_ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. X Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s) (iv) Is the proamzation listed (iii) Type of organization (v) Amount of monetary (vi) Amount of other (i) Name of supported (described on lines 1-10 support (see instructions) support (see instructions) organization Yes above (see instructions)) 6 139,830. SCHOOLS 

				<del>,</del>		
llendar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and					,	<b>/</b>
membership fees received. (Do not	1				/	
include any "unusual grants ")				<del>                                     </del>	//_	
2 Tax revenues levied for the organ-					/	
ization's benefit and either paid to				•		
or expended on its behalf					/	<del> </del>
3 The value of services or facilities	1			/		
furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3		1				
5 The portion of total contributions				/		<u> </u>
by each person (other than a						
governmental unit or publicly						1
supported organization) included						
on line 1 that exceeds 2% of the			/	1	ļ	
amount shown on line 11,						
column (f)						
6 Public support. Subtract line 5 from line 4			/			
ection B. Total Support		,				
llendar year (or fiscal year beginning in) 🕨	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7 Amounts from line 4		<del>                                     </del>	/	<del> </del>		<del></del>
B Gross income from interest,	j	/				
dividends, payments received on	]					
securities loans, rents, royalties,	1					
and income from similar sources		<del>                                     </del>				
9 Net income from unrelated business			ļ			-
activities, whether or not the		/				
business is regularly carried on  Other income Do not include gain		/				
or loss from the sale of capital	/	ď				
assets (Explain in Part VI)	/				1	
1 Total support. Add lines 7 through 10						
2 Gross receipts from related activities	etc (see instruction	ons)		•	12	
3 First five years. If the Form 990 is fo			d, fourth, or fifth ta	ax year as a section		
organization, check this box and sto						<b>▶</b> [
ection C. Computation of Publ	<del></del>			<del></del>	<del> </del>	
4 Public support percentage for 2018 (			olumn (f))		14	
5 Public support percentage from 2017					[ 15 ]	
6a 33 1/3% support test - 2018. If the				14 is 33 1/3% or m	ore, check this b	ox and
stop here. The organization qualifies						▶∟
b 33 1/3% support test - 2017. If the				l line 15 is 33 1/3%	or more, check t	his box
and stop here. The organization qua						<b>,</b>
7a 10% -facts-and-circumstances test	_					
and if the organization meets the "fac	ts-ann-circumstan	Ced. Tedt. CDECK 10	I UUTZ ANK YANLEI	nere_Finairun Pa	rr vi nowane om	arii/aiii.ii
·						

(Complete only if you checked the box on line 10 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.)

Se	ction A. Public Support	elow, piease comp	nete i art ii j				
Cale	endar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services 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-		,				
4	iness under section 513  Tax revenues levied for the organ-		<u> </u>		<del>                                     </del>	<u>('</u>	<u> </u>
	ization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and			/	<del></del>		<del> </del>
Ł	3 received from disqualified persons 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						
(	Add lines 7a and 7b	·					
	Public support. (Subtract line 7c from line 6)	~•	, , , /	·			
	ction B. Total Support	4 ) 0044	<b>(b)</b> 2015	4-1,0040	4,0047	/ ) 0010	(0.T-4-1
	ndar year (or fiscal year beginning in)	(a) 2014	(B) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
-	Gross income from interest, dividends, payments received on securties loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	e Add lines 10a and 10b  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 VI.)						
	Total support. (Add lines 9, 10c, 11, and 12)	<u></u>			<u> </u>		<u> </u>
14	First five years. If the Form 990 is for	the organization's	first, second, thu	d, fourth, or fifth to	ax year as a section	n 501(c)(3) organiza	ation,
Sec	check this box and stop here ction C. Computation of Publi	c Support Per	centage		· · · · · · · · · · · · · · · · · · ·	<del></del>	
_	Public support percentage for 2018 (I			column (fi)	<del></del>	15	<u> </u>
	Public support percentage from 2017			• • • •		16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20	)18 (line 10c, colur	nn (f), divided by l	ine 13, column (f))	•	17	%
18	Investment income percentage from	<b>2017</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2018. If the	=					7 is not
	more than 33 1/3%, check this box an	•1	_				. ▶□
b	33 1/3% support tests - 2017. If the	• -					ınd
	line 18 is not more than 33 1/3%, che	_	-				▶⊢
	Private foundation. If the organization	n did not check a l	box on line 14, 19	a, or 19b, check th			2 000 57) 0045
6320;	23 10-11-18				Sch	euule A (Form 990	or 990-EZ) 2018

# Schedule A (Form 990 or 990-EZ) 2018 EDUCATION FOUNDATION OF BLOOMINGTON

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

<u>Sec</u>	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		X
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		<u> </u>
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below	4a		<u>X</u>
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	]		
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations	4b		
C	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
5a	, , , , , , , , , , , , , , , , , , , ,			
	answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN	1		

numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action

	dule A (Form 990 or 990-EZ) 2018 EDUCATION FOUNDATION OF BLOOMINGTON 41-15	6890	4 Pa	ge 5
L	t IV   Supporting Organizations <sub>(continued)</sub>		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		103	1
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	<u> </u>	!	
	below, the governing body of a supported organization?	11a		X
b	A family member of a person described in (a) above?	11b	لــــا	X
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c	<u> </u>	_X
Sec	tion B. Type I Supporting Organizations		T	<del></del>
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	l		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	}		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		<u> </u>
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			•
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sec	the supported organization(s). tion D. All Type III Supporting Organizations	<u> </u>		L
000	tion 5. All Type in Supporting Sigurizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	X	137
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			.33
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s)	2	X	X
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			1
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	<u> </u>		المالد الله
500	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
		`		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions  The organization satisfied the Activities Test Complete line 2 below	,.		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see ins.	tructions	).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1		
		<u> </u>		
	WHOSE FAMILY INCOME IS NOT LOW ENOUGH TO QUALIFY FOR FEDERALLY	FUND	RD	
	FREE\REDUCED-PRICE MEALS.		==-	
		-		
4d	Other program services (Describe in Schedule O.)			
	(Expenses \$ 25,995 • including grants of \$ ) (Revenue \$		<del></del>	
<u>4e</u>	Total program service expenses ▶ 141,994.			

Schedule A (Form 990 or 990-EZ) 2018

instructions).

	dule A (Form 990 or 990-EZ) 2018 EDUCATION FOU	NDATION OF BLOC		1-1568904 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continued)	1
<u>Secti</u>	on D - Distributions	<del></del>		Current Year
_1_	Amounts paid to supported organizations to accomplish exer	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity	t purposes of supported		
3	Administrative expenses paid to accomplish exempt purpose	e of euroported organizations	· · · · · · · · · · · · · · · · · · ·	
		s or supported organizations		
4_	Amounts paid to acquire exempt-use assets			
_5_	Qualified set-aside amounts (prior IRS approval required)			
<u>-6</u>	Other distributions (describe in Part VI) See instructions		•	<del></del>
<u>-7</u>	Total annual distributions. Add lines 1 through 6		····- · · · · · · · · · · · · · · · · ·	
8	Distributions to attentive supported organizations to which the	ie organization is responsive		
	(provide details in Part VI) See instructions			
9_	Distributable amount for 2018 from Section C, line 6			<u>'</u>
<u>10</u>	Line 8 amount divided by line 9 amount	40	- an	()
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI) See instructions			
3	Excess distributions carryover, if any, to 2018		•	
а	From 2013			
	From 2014			
	1 rom 2015			
	From 2016			
	From 2017		1	1
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
<del></del> -	Remainder Subtract lines 3g, 3h, and 3i from 3f			
	Distributions for 2018 from Section D,	A-20 C		,
•	line 7 \$			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			
	Remaining underdistributions for years prior to 2018, if			i
5	any Subtract lines 3g and 4a from line 2. For result greater			
	,			
6	than zero, explain in Part VI. See instructions Remaining underdistributions for 2018. Subtract lines 3h			· · · · · · · · · · · · · · · · · · ·
0	and 4b from line 1. For result greater than zero, explain in			
	- 1			
_	Part VI See instructions.		· · · · · · · · · · · · · · · · · · ·	1
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c			<del> </del>
_8_	Breakdown of line 7			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
е	Excess from 2018			<u> </u>

Schedule A (Form 990 or 990-EZ) 2018

Schedule A	(Form 990 or 990-E	Z) 2018 ED	UCATION	FOUNDA	TION O	F BLOOMI	NGTON	41-1568904	Page 8
Part VI	Supplemental Part IV, Section A, line 1, Part IV, Sec Section D, lines 5,	Informati lines 1, 2, 3b tion D, lines 2 6, and 8, and	<b>on.</b> Provide to, 3c, 4b, 4c, 52 and 3, Part IV	he explanation a, 6, 9a, 9b, 9 V, Section E, li	ns required t c, 11a, 11b; ines 1c, 2a, 2	by Part II, line 10 and 11c, Part I 2b, 3a, and 3b,	O, Part II, line 17a V, Section B, lines Part V, line 1, Par	or 17b, Part III, line 12, s 1 and 2, Part IV, Section t V, Section B, line 1e, Pa	C
	(See instructions)						<del>.</del>		
							<del> </del>		<del></del>
					<del></del>				<del></del>
				<del></del>	······································				
					-	· <del>-</del> · · ·		····	
				-·- <u>-</u>	<del></del>				<u>-</u> .
							· · · · · · · · · · · · · · · · · · ·	<del> </del>	
			<del></del>						
		· · · · · · · · · · · · · · · · · · ·							
	·						· · · · · · · · · · · · · · · · · · ·		
					·				
`									
				· ··-			•		
					τ				•
*									
,				1					
						<del></del>			

Schodulo\_A (Earm 990 or 990 E7) 9019

M.-63. W. ... ..

### **SCHEDULE D**

**Supplemental Financial Statements** 

Department of the Treasury Internal Revenue Service

(Form 990)

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

2018 Open to Public Inspection

OMB No 1545-0047

Name of the organization

EDUCATION ECONOMICAL OF DICOMINGMON

Employer identification number

D	BDUCATION FOUNDATIO		41-1566904
Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		6 . E . I . I . I
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		<del></del>
4	Aggregate value at end of year	<u> </u>	
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	sed only
	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose c	onferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	ducation) Preservation of a histo	rically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
	Number of conservation easements included in (c) acquired a	, ,	<del></del>
_	listed in the National Register	<b>,</b>	2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	
•	year >	, <u>-</u>	<b>3</b>
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
-	<b>&gt;</b>	3, , , ,	,
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easements during the year
	<b>▶</b> \$	· ·	• •
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h	)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat		
	conservation easements		-
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	•	
	the text of the footnote to its financial statements that descri		, , , ,
h	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ec	• •	
	relating to these items	addition, or research in farmeralies of pass	io service, provide and remaining amount
	(i) Revenue included on Form 990, Part VIII, line 1		<b>▶</b> \$
		· · · · · · · · · · · · · · · · · · ·	<b>S</b>
_	(ii) Assets included in Form 990, Part X	ocurse or other similar assets for financial	
2	If the organization received or held works of art, historical treating fallowing amounts required to be reported under SEAS 1:		yairi, provide
_	the following amounts required to be reported under SFAS 1:	to (AGO 900) relating to these items	<b>•</b> •
	Revenue included on Form 990, Part VIII, line 1		▶ \$ ▶ \$
	Assets included in Form 990, Part X	der Form 900	Schedule D (Form 990) 2018
니다스	For Paperwork Reduction Act Notice, see the Instructions	101 FUI 111 33U.	Schedule D (FOIH) 330) 20 10

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
832051 10-29-18

41-1568904 Page 2 Schedule D (Form 990) 2018 EDUCATION FOUNDATION OF BLOOMINGTON 41-1568904 P.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) EDUCATION FOUNDATION OF BLOOMINGTON 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) \_d \_\_\_l nan\_or exchange programs Public exhibition (Miles

Part VII Investments - Other Securities.		
Complete if the organization answered "Yes" of		11b See Form 990, Part X, line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other MPIS. Foundation		Ed End of your Market Valu
(A)		•
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>	p 4 1 % N P 18 3 / \$
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of valuation. Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
I otal. (Col. (b) must cqual f orm 990, I art X, col. (U) line 13.)		Jan Wall and the state of the state of the state of
,,		
		4
		• -

	dule D (Form 990) 2018 EDUCATION FOUNDATION OF E		41-1568904 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stater	nents With Revenue	e per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		1.
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	,
_	Recoveries of prior year grants	2c	<del></del>
d	Other (Describe in Part XIII )	2d	
	Add lines 2a through 2d	[ 20 ]	Ze Ze
e	Subtract line 2e from line 1		3
3	• • •	•	·
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.4.1	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII )	4b	<del></del>
C	Add lines 4a and 4b	• •	4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	manta With Evnana	5
Pai	t XII Reconciliation of Expenses per Audited Financial State		es per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		1,
а	Donated services and use of facilities	2a	
b	Prior year adjustments .	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1	•	3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	• •	
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
h	Other (Describe in Part XIII )	4b	· ·
c	Add lines 4a and 4b	<u> </u>	4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990. Part I, line 18.)	•• ••	5
	t XIII Supplemental Information.	<del>-</del> <del>-</del>	
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P.	art IV lines 1b and 2b Pa	rt V line 4 Part X line 2 Part XI
	2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any a		
	and 40, and rate wit, into 20 and 40 7630 complete this part to provide any a		
	The state of the s	<del></del>	
PAR	T V, LINE 4:		
1 111	I V, DING T.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
DAR	T V, LINE 4: INCOME FROM PERMANENTLY END	אב בתווום מאוים	E INTENDED TO BE
LAI	1 V, DINE 4: INCOME FROM FERMINABILITED	OWED PONDO AK	B INTENDED TO BE
TICE	D EOD CHILDENIN CCHOLADCHIDC		
USE	D FOR STUDENT SCHOLARSHIPS.		
	<del>-</del>		
		- <u></u>	· · · · · · · · · · · · · · · · · · ·
			•
	_		
	1 (	<del></del>	
		<del></del> _	
		······	
8 <u>32054</u>	10.29-18		Schedule D (Form 990) 2018

.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Go to www.irs.gov/Form990 for the latest information. ► Attach to Form 990. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990)

Open to Public

Inspection

2 [] **Employer identification number** 41-1568904 (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant EDUCATION FOUNDATION OF BLOOMINGTON (c) IRC section (if applicable) General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Part Part

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line i taule LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2018)

**SCHEDULE 0** (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or 990-F7 or to provide any additional information.

OMB No 1545-0047 2018

