	od	.	l Peturn of Or	ganization Exempt Fron	n Income Ta	Y	OMB No 1545-0047	
Forr	.° 99	Ur		-			2010	
(Rev	January 2	2020)		r 4947(a)(1) of the Internal Revenue Cod				
		the Treasury		ial security numbers on this form as it	= =	•	Open to Public	
	nai Revenu		L	.gov/Form990 for instructions and the		_	Inspection	
			dar year, or tax year beginnin	~		D Emple	, 20	
B⊓	Check if a Address c		Doing business as	LE PUBLIC SCHOOLS EDUCATION FO	DUNDATION	D Employ	er identification number 65-1269109	
H	Name cha	•		x if mail is not delivered to street address)	Room/suite	F Telepho	one number	
H								
Ħ		/terminated		country, and ZIP or foreign postal code	<u>-</u>		434-799-6400	
	Amended	-	DANVILLE, VA 24543			G Gross r	eceipts \$ 127,084	
	Application	n pending	F Name and address of principal	officer Anne Moore-Sparks	H(a) Is this a gi	oup return for	subordinates? Yes Vo	
			341 Main Street, Suite 300, D	Danville, VA 24541	H(b) Are all s	ubordinate	s included? 🗌 Yes 🔲 No	
<u> </u>	Tax-exem	pt status	▼ 501(c)(3)) ◀ (insert no)	527 If "No,"	attach a list	(see instructions)	
<u>J</u>	Website:				H(c) Group e	xemption n	umber ▶	
				ciation ☐ Other ► ☐ L Year o	f formation 2006	M State o	f legal domicile VA	
P	art í	Summa					.	
		-	-	ssion or most significant activities: To	o support the educat	ional acti	vities and endeavors	
Governance	<u> </u>	of Danville	Public Schools					
Ē	1 2	Thools thin	how N (7) if the organization	on discontinued its operations or disp	anad of mare than	250/ of #		
Š						3		
<u>ග</u>								
Activities &			independent voting memb per of individuals employed	10				
Ĭ.	1		per of volunteers (estimate i			6		
Act	1			n Part VIII, column (C), line 12		7a	0	
	l .			ne from Form 990-T, line 39		7b		
		101 01111 0101			Prior Yea		Current Year	
•	8 0	Contributio	ons and grants (Part VIII, line	e 1h)		39,052	121,549	
Revenue	1		ervice revenue (Part VIII, lin					
eve	10 li	nvestment	income (Part VIII, column	(A), lines 3, 4, and 7d)				
Œ	11 (Other reve	nue (Part VIII, column (A), lii	nes 5, 6d, 8c, 9c, 10c, and 11e)		133	5,535	
	12 T	otal reven	ue-add lines 8 through 11	(must equal Part VIII, column (A), line	12)	39,185	127,084	
	13 🤄	Grants and	l similar amounts paid (Parl	t IX, column (A), lines 1-3)		31,742	80,092	
	1	•	,	IX, column (A), line 4)				
ses	1			e benefits (Part IX, column (A), lines 5-	· — —			
				column (A), line 11e)				
Expen			aising expenses (Part IX, co					
_			enses (Part IX, column (A), I			1,621	815	
			nses. Add lines 13-17 (mus ess expenses. Subtract line		•	33,363	80,907	
	19 F	revenue le	ess expenses. Subtract line		• •	5,822	46,177	
_ <u></u>	1				Beginning of Cum	ont Voor	End of Year	
ances	20 Т	Total acced			Beginning of Curr		End of Year	
Assets or Balances	20 T		s (Part X, line 16)	MAY 20 2020 Q	Beginning of Curi	84,114		
Net Assets or Fund Balances	20 T 21 T	otal liabili	s (Part X, line 16) ties (Part X, line 26)	MAY 2 0 2020 Q	Beginning of Curi	84,114	130,291	
Net Assets or Fund Balances	20 T 21 T 22 N	otal liabili let assets	s (Part X, line 16)	MAY 2 0 2020 Q	Beginning of Curi		130,291	
Pa	der penalti	otal liabili let assets Signatu es of perjury	s (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block	MAY 2 0 2020 Q	d statements, and to the	84,114 84,114	130,291 130,291	
Uni true	der penaltie e, correct, a	otal liabilities of assets Signatures of perjury and complete	ties (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block I declare that I have examined this Declaration of preparer (other the	MAY 2 0 2020 St. Line 21 MAY 20 2020 St. Line 21 MAY 20 2020 St. Line 21 MAY 20 2020 St. Line 2020 S	nd statements, and to the oreparer has any knowled	84,114 84,114 best of mydge	130,291 130,291 v knowledge and belief, it is	
Unitrud	der penaltie, correct, a	otal liabilities of assets Signatures of perjury and complete	ties (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block I declare that I have examined this be Declaration of preparer (other the	In a companying schedules are an officer) is based on all information of which p	d statements, and to the	84,114 84,114 best of mydge	130,291 130,291 v knowledge and belief, it is	
Uni true	der penaltie, correct, a	otal liabilities of perjury and completed Signatures of perjury and completed Signatures Anni	ties (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block I declare that I have examined this Declaration of preparer (other this ure of officer MOOVE - Spoul	MAY 2 0 2020 St. Line 21 MAY 20 2020 St. Line 21 MAY 20 2020 St. Line 21 MAY 20 2020 St. Line 2020 S	nd statements, and to the oreparer has any knowled	84,114 84,114 best of mydge	130,291 130,291 v knowledge and belief, it is	
Unitrud Siç He	der penalti e, correct, a	otal liabili Net assets Signatu es of perjury and complet Signatu Type o	ties (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block I declare that I have examined this Declaration of preparer (other that I have examined this pectagory of the MOOVE - Sparent of officer re MOOVE - Sparent of the management of the moove - Sparent name and title	MAY 20 2020 Set line 21 from me 50	nd statements, and to the preparer has any knowled Date	84,114 84,114 best of mydge	130,291 130,291 / knowledge and belief, it is	
Siç He	der penalti e, correct, a	otal liabili Net assets Signatu es of perjury and complet Signatu Type o	ties (Part X, line 16) ties (Part X, line 26) or fund balances. Subtract re Block I declare that I have examined this Declaration of preparer (other this ure of officer MOOVE - Spoul	In a companying schedules are an officer) is based on all information of which p	nd statements, and to the oreparer has any knowled	84,114 84,114 best of mydge	130,291 130,291 / knowledge and belief, it is	

For Paperwork Reduction Act Notice, see the separate instructions.

May the IRS discuss this return with the preparer shown above? (see instructions)

Cat No 11282Y

☐ Yes ☐ No Form **990** (2019)

4d Other program services (Describe on Schedule O.)
(Expenses \$ 2,450 including grants of \$ 2,450) (Revenue \$ 2,450)

66,076

Total program service expenses ▶

Form 99	0 (2019)			Page 3
Part	·		_	Page 3
	Officerial of frequired confedures		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
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		✓
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		1
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	1	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓_
	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		√
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		✓_
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
	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	12b		1
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		<u> </u>
	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
	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		✓_
	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		✓
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1

Part	V Checklist of Required Schedules (continued)		<i>5</i> 7	•
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	√	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		1
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		
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		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	—	✓
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		√
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		√
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		1
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		1
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	_		
	or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
Ь	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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	1	,
Part		, 30		
_	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	✓	

Part	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		1
b	If "Yes," enter the name of the foreign country ► See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		\
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<u>/ b</u>		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
a	required to file Form 8282?	10		
d e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		✓
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]			i
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	ļ	l	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
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			
C	Enter the amount of reserves on hand	<u> </u>		<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	_	/
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		ļ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			,
	excess parachute payment(s) during the year?	15_		/
	If "Yes," see instructions and file Form 4720, Schedule N.	10	—	-
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		✓

Form 99	0 (2019)	,	F	Page 6
Part '	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions.
Soction	Check if Schedule O contains a response or note to any line in this Part VI		• •	✓
Secu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	\vdash	163	140
	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 on Schedule O.]		
b	Enter the number of voting members included on line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
6	Did the organization have members or stockholders?	6		✓_
7a	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?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓_
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓	
b	Each committee with authority to act on behalf of the governing body?	8b	✓	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9	i ,	✓
Section	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C		
		40	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		✓
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		7
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	14		✓
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		✓
b	Other officers or key employees of the organization	15b		✓
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		<u> </u>
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	<u> </u>	<u> </u>
	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed Virginia			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.		·	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re	cords		
	Sharon Barksdâle, P O Box 9600, Danville, VA 24543, 434-799-6400			

	-
Page	4

			•
Form	990	(201	91

Part VII	Compensation of Officers, Direct	rs, Trustees	, Key Employees,	Highest C	Compensated	Employees,	and
1	Independent Contractors						

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

Check this box if neither the organization noi	r any relate	d org	anız	atio	n c	ompe	ensa	ited any current	officer, director,	or trustee.	
				((C)						
(A)	(B)	ļ			ition			(D)	(E)	(F)	
Name and title	Average hours	box,	(do not check more than one box, unless person is both an officer and a director/trustee)				n an	Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation	
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations	
(1) Shannon Hair, Chair	Volunteer						ļ			,	
215 Faith Court, Danville, VA 24540		✓_	<u> </u>	✓		<u> </u>	<u> </u>	0	0		
(2) Doris Wilson , Vice Chair P O Box 712, Danville, VA 24543	Volunteer	✓		1					0		
(3) Anne Moore-Sparks	Volunteer										
P O Box 9600, Danville, VA 24543		✓_						0	0		
(4) Anna Crawley	Volunteer										
909 Grove St. Apt. A, Danville, VA 24541		✓						0	0		
(5) Porchia Russell	Volunteer	ļ									
1026 Pallie Watlington Rd., Yanceyville, NC 27379		✓		L				0	0		
(6) Emmett Young	Volunteer										
226 Sycamore St., Danville, VA 24541		✓		<u>_</u>			<u> </u>	o	0		
(7) Leslie Sturdivant	Volunteer						ł				
1425 South Main St., Danville, VA 24541		✓			_	<u> </u>		0	0		
(8) Earl Reynolds	Volunteer						ļ				
307 Sunset Avenue, Martinsville, VA 24112		✓						0	0		
(9) Terri Hall	Volunteer										
432 Hawthorne Dr., Danville, VA 24541		/		_	_	ļ			0		
(10) Renee Hughes	Volunteer										
126 Smith Street, Danville, VA 24541		1	<u>L</u>	_		1	ļ	0	0		
(11)											
(12)											
(13)									-		
(14)											

Par	VII Section A. Officers, Directors, 1	rustees,	Key I	m	ploy	yee	s, an	d F	lighest Compe	nsated Emp	loyees (continued)
	(A) Name and title		box, office	Position (do not check more ti box, unless person is officer and a director,				an tee)	Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other compensation
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	from the
(15)											
(16)			}								
(17)											
(18)											
(19)											
(20)											-
(21)											
(22)											
(23)											
(24)											
(25)											
1b c d	Subtotal	VII, Section		•				A A	0 0	· <u>-</u>	0 0 0 0
2	Total number of individuals (including but reportable compensation from the organic		d to th	ose	e list	ted	above	e) w	ho received mor	e than \$100,00	00 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete to							mp	loyee, or highes	st compensate	Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual		an \$	150,		? /	f "Ye				
5	Did any person listed on line 1a receive of for services rendered to the organization										al 5 √
	ion B. Independent Contractors										
1	Complete this table for your five high compensation from the organization. Rep										
	(A) Name and business add	lress							(B) Description of ser	vices	(C) Compensation
		_						_			
2	Total number of independent contractor							L o th	nose listed abov	re) who	
	received more than \$100,000 of compens	ation from	the or	gan	izat	ion	▶				

Pari	t VIII	Statement of Revenue Check if Schedule O contains a response	onse or note to ar	ny line in this Pa	art VIII		
		Official in deficedure of contains a respec	nise of note to al	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated campaigns 1a	1				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 18)] :	ĺ		
2 E	С	Fundraising events 10] ,	ľ		,
if s	d	Related organizations 10] _			
n is	e	Government grants (contributions) 16)			ļ	
Sig	f	All other contributions, gifts, grants,			İ		
きを		and similar amounts not included above 11	127,084	4		ľ	Ì
결물	9	Noncash contributions included in					
S E	١.		\$				
<u> </u>	h	Total. Add lines 1a-1f	Business Code	127,084			
ġ.	2a		Business Code			-	
Program Service Revenue	Ι.				<u> </u>		
gram Ser Revenue	C						
ΕŽ	ď		-				
g a	ء ا		ſ	-			
ē	f	All other program service revenue					
_	g	Total. Add lines 2a-2f					
	3	Investment income (including dividen-					
	}	other similar amounts)		{	}	}	}
	4	Income from investment of tax-exempt to	ond proceeds >				
	5	Royalties	>				
		(i) Real	(ii) Personal				-
	6a	Gross rents 6a		1			}
	b	Less: rental expenses 6b	<u> </u>	_			
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
_	_	other than inventory 7a					
Revenue	b	Less: cost or other basis					
Ver	_	and sales expenses . 7b Gain or (loss) 7c	 	}			
æ	d d	Nich con on (lone)					
ē	1 _	- · · · · · · · · · · · · · · · · · · ·	 			<u> </u>	
Othe	8a	Gross income from fundraising events (not including \$					[
		of contributions reported on line	1])	}	
		1c). See Part IV, line 18 8a	11				
	ь	Less: direct expenses 8t		1			
	С	Net income or (loss) from fundraising ev					
	9a	Gross income from gaming					
		activities. See Part IV, line 19 . 9a	1				
	b	Less: direct expenses 9t					
	С	Net income or (loss) from gaming activity	ies >				
	10a	Gross sales of inventory, less	1				
		returns and allowances 10					
	,	Less: cost of goods sold 10					
	С	Net income or (loss) from sales of inven					
Ş			Business Code		<u> </u>		
eo ue	11a						
llar	b						
scellaneo Revenue	С	All all and an area	-				
Miscellaneous Revenue	d	All other revenue		 -		 	ļ
		Total Add lines 11a-11d		4		<u> </u>	
	12	Total revenue. See instructions	▶	127,084	l		L

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must comp	lete all columns. All	other organizations	must complete colu	mn (A)
360110	Check if Schedule O contains a response				
				(C)	(D)
	t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	Management and	Fundraising
שט, אס	, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				,·
	and domestic governments. See Part IV, line 21 .	26,058	26,058		
2	Grants and other assistance to domestic				•
	individuals. See Part IV, line 22	38,068	38,068		
3	Grants and other assistance to foreign				
9	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				
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 (nonemployees):				
а	Management	11,500		11,500	
b	Legal	528		528	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
9	(A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	2388		2388	
	•				
13	Office expenses	111		111	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses]			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .				
20	Interest	-			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance				
24	Other expenses. Itemize expenses not covered	1			
	above (List miscellaneous expenses on line 24e. If	1			
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	State Annual Registration Fee	25		25	
b	Board Meeting Lunches	279		279	
c	Washer & Dryer for homeless students	1950	1950		
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	80,907	66076	14,831	
26	Joint costs. Complete this line only if the	100,00	00070	17,031	
	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)	I		I	}

ř	art X	Balance Sheet Check if Schedule O contains a response or note to any line in this	Part X		
			(A) Beginning of year		(B) End of year
_	1	Cash—non-interest-bearing	. 84,114	1	130,291
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	· · · · · · · · · · · · · · · · · · ·
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director		·	•
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Asi	9	Prepaid expenses and deferred charges	` 	9	
	10a	Land, buildings, and equipment: cost or other		 	
	IVa	basis. Complete Part VI of Schedule D 10a			
	ь	Less. accumulated depreciation 10b		10c	· · · · · · · · · · · · · · · · · · ·
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	-
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		 	130,291
	17	Accounts payable and accrued expenses		17	130,231
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Ø	22	Loans and other payables to any current or former officer, director			i
tie	22	trustee, key employee, creator or founder, substantial contributor, or 35%			
Ē		controlled entity or family member of any of these persons	۲ 	22	
Liabilities	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		- -+	
	25	parties, and other liabilities not included on lines 17–24). Complete Part 3			
		of Schedule D	`	25	
	26	Total liabilities. Add lines 17 through 25		26	
<u></u>		Organizations that follow FASB ASC 958, check here ▶ □			
S		and complete lines 27, 28, 32, and 33.			1
<u>la</u>	27	Net assets without donor restrictions		27	
Ba	28	Net assets with donor restrictions		28	
힏		Organizations that do not follow FASB ASC 958, check here ▶ □	` 		
亞		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds	.	29	
şţs	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds.		31	
ţ	32	Total net assets or fund balances			130,291
Š	33	Total liabilities and net assets/fund balances		33	71 77
		Total reported and the depotential parallege	•		Form 990 (2019)

Form 99	0 (2019)			,	Pa	ge 12
Part	XI Reconciliation of Net Assets				-	-
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1				7,084
2	Total expenses (must equal Part IX, column (A), line 25)	2				0,907
3	Revenue less expenses. Subtract line 2 from line 1	3				6,177
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				4,114
5	Net unrealized gains (losses) on investments	5		-		
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 on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	10			13	0,291
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		<u></u>		
			_		Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in			
	Schedule O		-			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npiled	or			
	reviewed on a separate basis, consolidated basis, or both:			_	9 1	.]
_	Separate basis Consolidated basis Both consolidated and separate basis		-			لبِد
b	Were the organization's financial statements audited by an independent accountant?		` ⊢	2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ted or	1 a			
	separate basis, consolidated basis, or both:					1
	Separate basis Consolidated basis Both consolidated and separate basis		_ -		—	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov			_		
	the audit, review, or compilation of its financial statements and selection of an independent account.		⊢	2c		
	If the organization changed either its oversight process or selection process during the tax year, e Schedule O.	xpiain	טח			
0-		د ساست	-			
sa	As a result of a federal award, was the organization required to undergo an audit or audits as set for	rin in t	ne			

Form **990** (2019)

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 **Employer identification number Danville Public Schools Education Foundation** 65-1269109 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 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½, do fits 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). 12 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. 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. d 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 I. Type III. Type III. functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations. Provide the following information about the supported organization(s). (i) Name of supported organization (n) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (vi) Amount of listed in your governing (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Total

Part	(Complete only if you checked the	e box on line	5, 7, or 8 of I	Part I or if the	organization	failed to qua	
	Part III. If the organization fails to	qualify under	r the tests list	ed below, ple	ease complet	te Part III.)	<u> </u>
	on A. Public Support	() 0045	#1.0040	() 0047	(0.0040	() 0040	
Calen 1	dar year (or fiscal year beginning in) ▶ Gifts, grants, contributions, and	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
•	membership fees received. (Do not		1	;			
	include any "unusual grants.")	29,935	43,113	19,462	39,185	127,084	258,779
2	Tax revenues levied for the	20,000	40,110	10,102		127,004	200,770
	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	29,935	43,113	19,462	20 105	127,084	259 770
-		29,933	43,113	19,462	39,185	127,084	258,779
5	The portion of total contributions by each person (other than a				1		
	governmental unit or publicly	l					
	supported organization) included on	ļ		-			
	line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f)						~/21)
<u>6</u> Secti	Public support. Subtract line 5 from line 4 on B. Total Support	1	i				1001
	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	29,935	43,113	19,462	39,185	127,084	258,779
8	Gross income from interest, dividends,						
	payments received on securities loans,	i					
	rents, royalties, and income from similar sources					-	
9	Net income from unrelated business				-	-	
9	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 VI.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instructio	ne)			12	258,779
13	First five years. If the Form 990 is for the						501(c)(3)
	organization, check this box and stop her	-					. –
Secti	on C. Computation of Public Support						
14	Public support percentage for 2019 (line 6	, column (f) div	rided by line 11	I, column (f))		14	100 %
15	Public support percentage from 2018 Sch					15	<u>%</u>
16a	331/3% support test—2019. If the organization quality box and stop here. The organization quality						
b	331/3% support test—2018. If the organization			-			
-	this box and stop here. The organization of						
17a	10%-facts-and-circumstances test – 20		•	_			_
	10% or more, and if the organization me	ets the "facts-	and-circumsta	nces" test, chi	eck this box a	nd stop here.	Explain in
	Part VI how the organization meets the "f	acts-and-circu	ımstances" tes	st. The organiz	ation qualifies	as a publicly	supported
	-						▶ □
b	10%-facts-and-circumstances test—20	_				27.5	
	15 is 10% or more, and if the organization members are the transfer of the tra						
	supported organization	icets the lact	s-anu-circums	ianices (est. 1	ne organizatio	n qualifies as	a publicly ▶ □
18	Private foundation. If the organization do	l not check a b	oox on line 13.	16a, 16b. 17a.	or 17b, check	this box and	see
	instructions						▶ 🗆

	le A (Form 990 or 990-EZ) 2019	. <u></u>					Page 3
Part							
	(Complete only if you checked the						nder Part II.
Coati	If the organization fails to qualify on A. Public Support	under the te	sts listed bei	ow, piease co	omplete Part	11.)	
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees	(a) 2013	(0) 2010	(6) 2017	(u) 2018	(e) 201 3	(i) Potai
•	received. (Do not include any "unusual grants.")				l		
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. Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b		/				
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 10a	Amounts from line 6						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975			-			
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	<u> </u>					
14	First five years. If the Form 990 is for the organization, check this box and stop he	_	n's first, secon		-		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2019 (line 8		-				%
16_	Public support percentage from 2018 Sch			<u></u>	<u> </u>	16	%
	on D. Computation of Investment In			veline 10 sel	mn (6)	47	
17 18	Investment/income percentage for 2019 (Investment income percentage from 2018			•		17	% %
19a	33 ¹ / ₃ % support tests—2019. If the organi						
	17/s not more than 331/3%, check this box 331/3% support tests—2018. If the organiz	and stop here .	. The organizati	on qualifies as	a publicly supp	orted organizat	ion . ▶ 🔲

line 18 is not more than 331/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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.)

	000110110 / 1, D, u.i.	,	00 00000	 ,	••••	0.0.0	 	 _,		,,,,,	 <u> </u>		
Section A.	All Supporting O	rganiza	ations										
		·										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		
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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
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		
С	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		
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		
С	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.	4-		,
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN 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 was accomplished (such as by amendment to the organizing document).	4c 5a		· ,
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С 6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	-	
В	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b	_	

Pařt	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	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>	
Secti	on B. Type I Supporting Organizations			
			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	ĺ		
	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			
	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	<u>⊢</u> •		
_	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		
Section	on 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			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations			
_			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	ĺ		
	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		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	 		
2	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		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	┝╼┈		- 1
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	ļ		
	supported organizations played in this regard	3		
Section	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in		
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]		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	1		
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	<u> 2a</u>		
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.	 -		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2019			Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functional Part V Type III Non-Function Part V Type III Non	gani	zations	•
Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organization.			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5	<u> </u>	
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6	•	
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
	1b		
b Average monthly cash balances c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other	١.٣		
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,	╫	 	
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7	· · · · · · · · · · · · · · · · · · ·	
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5	· · · · · · · · · · · · · · · · · · ·	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functional	ly int	egrated Type III support	ing organization (see
instructions).	-		- - ,

Part	Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continuea)	
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted	-
3	Administrative expenses paid to accomplish exempt purp	nizations		
4	Amounts paid to acquire exempt-use assets	<u> </u>		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			<u></u>
8	Distributions to attentive supported organizations to whice (provide details in Part VI). See instructions.	th the organization is res	sponsive	
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
e	From 2018			
f_	Total of lines 3a through e			
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
i_	Carryover from 2014 not applied (see instructions)			
<u>_j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7:			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.		<u> </u>	
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015 .			
b				
	Excess from 2017			
d	Excess from 2018			
е	Excess from 2019			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
	,
	·
*	

SCHEDULE D (Form 990)

Supplemental Financial Statements

➤ 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.

on. Upen to Pi

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

2019
Open to Public Inspection

OMB No 1545-0047

<u>anvi</u> l	lle Public Schools Education Foundation		65-1269109
Pai			s or Accounts.
	Complete if the organization answered "		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	22	
2	Aggregate value of contributions to (during year) .	121,549	
3	Aggregate value of grants from (during year)	80,092	
4	Aggregate value at end of year	124,707	5,58
5	Did the organization inform all donors and donor a funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, an	•	
U	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		
ar	t II Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the o		
	Preservation of land for public use (for example, recreation		a historically important land area
	Protection of natural habitat		a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
	easement on the last day of the tax year.	·	Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easements		. 2b
С	Number of conservation easements on a certified hi		
ď	Number of conservation easements included in (c) acquired after 7/25/06, and not or	na
	3		
;	Number of conservation easements modified, trans	ferred, released, extinguished, or term	inated by the organization during the
	tax year ▶		
•	Number of states where property subject to conserv		and a language of
•	Does the organization have a written policy region violations, and enforcement of the conservation eas		
	Staff and volunteer hours devoted to monitoring, inspec		
)	Stair and volunteer riodis devoted to monitoring, inspec	ung, nanding of violations, and emorcing	Conservation easements during the year
,	Amount of expenses incurred in monitoring, inspecting	handling of violations, and enforcing o	onservation easements during the year
	>\$	g, nanding of violations, and emoreing o	onservation casements during the year
,	Does each conservation easement reported on line 2	O(d) above satisfy the requirements of s	ection 170(b)(4)(B)(i)
	In Part XIII, describe how the organization reports of		_ _
	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easemer	nts.	
ar	III Organizations Maintaining Collections		Other Similar Assets.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 8.	
а	If the organization elected, as permitted under FASI	B ASC 958, not to report in its revenue	e statement and balance sheet work
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote to	o its financial statements that describe	s these items.
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held	•	earch in furtherance of public service
	provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
?	If the organization received or held works of art,		assets for financial gain, provide the
	following amounts required to be reported under FA	_	.
a	Revenue included on Form 990, Part VIII, line 1		
ь	Assets included in Form 990, Part X		🟲 💲

Part	III Organizations Maintaining	Collections o	f Art, His	torical T	reasures,	or O	ther Similar As	sets (cor	ntintied)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and							
а	☐ Public exhibition		d	Loan	or exchange	e progi	ram		
b	☐ Scholarly research		е	Other					
С	☐ Preservation for future generations								
4	Provide a description of the organiza XIII.	tion's collections	and expla	un how t	hey further	the org	ganızatıon's exen	npt purpo:	se in Part
5	During the year, did the organization assets to be sold to raise funds rather								i □ No
Part	IV Escrow and Custodial Arra	angements.							
	Complete if the organization 990, Part X, line 21.						·		Form
1a	Is the organization an agent, trustee included on Form 990, Part X?								i □ No
b	If "Yes," explain the arrangement in P	art XIII and comp	olete the fo	llowing to	able:	_	1		
						I.		mount	
C	Beginning balance					10	+		
d	Additions during the year					10			
e f	Distributions during the year Ending balance					16			
2a	Did the organization include an amou						<u> </u>	? □ Ye s	. □ No
b									
	V Endowment Funds.			•		•			
	Complete if the organization	n answered "Ye	s" on For	m 990, l	Part IV, line	e 10.			
		(a) Current year	(b) Pri	or year	(c) Two year	s back	(d) Three years back	(e) Four	ears back
1a	Beginning of year balance								
b	Contributions			<u> </u>					
С	Net investment earnings, gains, and losses								
d	Grants or scholarships							_	
е	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance				<u> </u>				
2	Provide the estimated percentage of			e (line 1ç	, column (a)) held	as:		
a	Board designated or quasi-endowme	nt ▶	%						
b	Permanent endowment								
С	Term endowment ▶% The percentages on lines 2a, 2b, and	•	100%						
3a	Are there endowment funds not in th			zation th	at are held	and ac	Impostered for th	10	
Ja	organization by:	e possession or	ine organi	zation th	at are ricio	and ac	arministered for th	[•	Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related of	organizations liste	ed as requi	red on S	chedule R?			3b	
4	Describe in Part XIII the intended use		tion's end	owment f	unds.				
Part	Land, Buildings, and Equip Complete if the organization		es" on For	m 990, l	Part IV, line	e 11a.	See Form 990,	Part X, I	ne 10.
	Description of property		other basis tment)	1 ' ' ' '	or other basis other)		Accumulated lepreciation	(d) Book	value
1a	Land			1					
b	Buildings		-	<u> </u>			-		
С	Leasehold improvements				1				
d	Equipment								
е	Other								
Total.	Add lines 1a through 1e. (Column (d) i	must equal Form	990. Part	X. columi	n (B), line 10)c.) .	▶		

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form	990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Meth	od of valuation of-year market value
(1) Financial	derivatives			
(2) Closely h	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
<u>(F)</u>				
(G)				
(H)	4)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.)		L	
Part VIII	Investments—Program Related. Complete if the organization answered "Yes" on For	m 000 Part IV lin	o 11c See Form	000 Part V line 13
	(a) Description of investment			
	(a) Description of Investment	(b) Book value		od of valuation of-year market value
<u>(1)</u>	·-·			
(2)				
_(3)			ļ	
(4)				
(5)				
(6)				
(7)		<u> </u>		···
(8)				
(9)	mn (b) must equal Form 990, Part X, col (B) line 13.) .			
Part IX	Other Assets.	L		
THIT	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11d. See Form	990. Part X. line 15.
	(a) Description			(b) Book value
(1)				· · · · · · · · · · · · · · · · · · ·
(2)		· · ·		
(3)				
(4)				
(5)				
(6)				
(7)				<u> </u>
_(8)				
(9)	· · · · · · · · · · · · · · · · · · ·			
	mn (b) must equal Form 990, Part X, col (B) line 15.)		<u> </u>	···
Part X	Other Liabilities. Complete if the organization answered "Yes" on Forline 25.	m 990, Part IV, lın	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability	· · ·		(b) Book value
(1) Federal in				(2) 2300 (4.20
(2)				
(3)				· · · · · · · · · · · · · · · · · · ·
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.) .			
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footne			
organization's	s liability for uncertain tax positions under FASB ASC 740. Check	here if the text of the	footnote has been p	rovided in Part XIII .

Part			Return.
	Complete if the organization answered "Yes" on Form 990,		
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 1
а	Net unrealized gains (losses) on investments	2a	_
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	<u> </u>
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
ь	Other (Describe in Part XIII.)	4b	<u> </u>
C	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line		
Part	XII Reconciliation of Expenses per Audited Financial States		er Return.
	Complete if the organization answered "Yes" on Form 990,	Part IV, line 12a.	
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:		
а	Donated services and use of facilities	2a	_
b	Prior year adjustments	2b	_;
C	Other losses	2c	
d	Other (Describe in Part XIII.)		<u> </u>
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		⊣
b	Other (Describe in Part XIII.)		-
C	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin	ne 18.)	5
	XIII Supplemental Information.		h. Dort V. line A. Dort V. line
	le the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part		
۷, r aı	t XI, lilles 20 and 45, and 1 art XII, lilles 20 and 45. Also complete this part	to provide any additionari	morniation.

Schedule D (Fo	orm 990) 2019	Page 5
Part XIII	Supplemental Information (continued)	
		
		••••••
		
		······································
		·
•••••		·
••••		

SCHEDULE (Form 990)

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

OMB No 1545-0047

		Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.	
0	Troops	► Attach to Form 990.	Open to Public .
Department Internal R	Internal Revenue Service	► Go to www.irs.gov/Form990 for the latest information.	Inspection
Name of	Name of the organization		Employer identification number
Danville	Public School	Danville Public Schools Education Foundation	65-1269109
Part	General	Part I General Information on Grants and Assistance	
-	Does the organ	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 c	the selection criteria used to award the grants or assistance?	
8	Describe in Pa	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	

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 recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

Part II

Ŧ	1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(e) Amount of non- (f) Method of valuation cash assistance other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
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(2)								
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8)								
6								
(10)								
(11)								
(12)								
0 m	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	501(c)(3) and gov ganizations listed	vernment organiza d in the line 1 table	tions listed in the l	ine 1 table			A A .
For	For Paperwork Reduction Act Notice, see the Instructions for Form	ee the Instruction	ns for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2019)

Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	mestic Individus space is needed	als. Complete if the I.	organization answ	ered "Yes" on Form 990,	Part IV, line 22.
,	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Schol	Scholarshins	7.4	38 068			The second secon
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Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information re	equired in Part I, line	e 2; Part III, column	(b); and any other additi	onal information.
Grants are	Grants are for specific items and activities. Purchase orders or other documentation are used that are approved by Foundation board members and Danville Public Schools administration	ers or other docume	entation are used that a	re approved by Found	ation board members and Da	nville Public Schools administration
to assure th	to assure that money is spent on specific items and services that have been approved for purchase. Invoices and other documentation are checked to make sure money is expended on	ces that have been	approved for purchase	. Invoices and other d	ocumentation are checked to	make sure money is expended on
approved items.	tems.					
Students m	Students must complete scholarship applications and requirements	quirements for scho	larships. Scholarship o	ommittees are used to	select recipients of some so	for scholarships. Scholarship committees are used to select recipients of some scholarships based on merit and need.
Two signat	Two signatures are required on all checks.	•		6 6 6 6 6 6 6 6 1 1 1 1 1 1 1 1 1 1 1 1		
						Schedule I (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2019

Open to Public Inspection

Employer Identification number

Danville Public Schools Education Foundation	65-1269109
Part III Line 2	
New Program Services for 2019:	
	·
Support vocational labs at two middle schools (\$25,000)	
2. Transition Stop - Location to support homeless and other disadvantaged students. Provides clother	s, shoes, washer, dryer,
school supplies and other needs for students. (\$35,000)	
·	
Part VI Line 11	
Form 990 was reviewed by the Director of the Board of Danville Public Schools Education Foundation.	
Board members were informed when the 990 was completed. Form 990 is available upon request to all Bo	ard members.
Part V1 Line 19	
. Documents are available to the public upon request. Information about program accomplishments are incl	uded in public meetings of the
Danville Public School Board and other means of advertisement such as newspapers, websites, social me	
Danville Public School Board and other fliearis of advertisement such as newspapers, websites, social flie	uia, etc.
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Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
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