Form **990-EZ**

Short Form

2949222600617

OMB No. 1545-0047

2019

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

▶ Do not enter social security numbers on this form, as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

Open to Public Inspection

		nue Service		ll. d	0040			20 20
			r year, or tax year beginning	July 1	, 2019, 2	and ending	June	
_	heck if ap	•	C Name of organization ?				D Employer	r identification number
_	ddress ci	-	Canyon-Owyhee School Service Agenc				F Talaskan	27-0427652
	lame chai nitial retur	-	Number and street (or P.O box if mail is not de	elivered to street addres	is) 🚰	Room/suite	E Telephon	e number
=		n/terminated	109 Penny Lane		l			208-482-6074
=	mended		City or town, state or province, country, and ZI	P or foreign postal code	9	ルン	F Group E	· ·
	pplication	n pending	Wilder, Idaho 83676			<u> </u>		None ?
G A	ccount	ing Method) ▶		Н	Check ►	If the organization is not
I W	ebsite	: ► <u>www</u>	ossaschools.org				required to	attach Schedule B
J Ta	x-exem	npt status (che	ck only one) - 🗹 501(c)(3) 🔲 501(c) () ◀ (insert no.) 🗌	4947(a)(1) or	□ 527	(Form 990,	990-EZ, or 990-PF).
KF	orm of	organization	☑ Corporation ☐ Trust	☐ Association	Other			
			b to line 9 to determine gross receipts. If		200,000 or m	nore, or if tota	l assets	
(Par	t II, colu		500,000 or more, file Form 990 instead of				. •	\$ 168,601
Pa	art I	Revenu	e, Expenses, and Changes in Ne	et Assets or Fun	nd Balance	es (see the	instructio	ns for Part I) 🔼
		Check If	he organization used Schedule O t	o respond to any	question i	n this Part I		<u></u> ,
?	1	Contribution	ns, gifts, grants, and similar amounts	received			<u> 1</u>	168,601
?	2	Program s	rvice revenue including government t	fees and contracts			2	<u>0</u>
?	3	Membersh	o dues and assessments				3	0
?	4	Investmen	income				4	. 0
	5a	Gross amo	unt from sale of assets other than inv	entory	. 5a	-	0	
	b	Less: cost	or other basis and sales expenses.		. 5b		0	
	С	Gain or (lo	s) from sale of assets other than inve	ntory (subtract line	e 5b from lir	ne 5a)	50	<u>o</u>
	6	Gaming ar	d fundraising events:					
	а	Gross inc	me from gaming (attach Schedul	e G if greater t	han			
e l		\$15,000)			· 6a		O	
Revenue	b		ne from fundraising events (not inclu			contribution	ns	
Re			using events reported on line 1) (atta				ŀ	
_		sum of suc	n gross income and contributions exc	ceeds \$15,000) .	· 6b		0	
	С		expenses from gaming and fundrais		. 6c		o	
	d	Net incom	or (loss) from gaming and fundrais	ing events (add li	nes 6a and	l 6b and su	btract p	
		line 6c)					· · 60	0 to
	7a	Gross sale	of inventory, less returns and allowa	inces	. 7a		0	
	b		of goods sold		. 7b		0	
	С	Gross prof	t or (loss) from sales of inventory (sub	otract line 7b from	line 7a) .		70	0
	8	Other reve	ue (describe in Schedule O)				8	<u> </u>
	9	Total reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, a	nd 8	<u> </u>	<u></u>	. ▶ 9	
	10	Grants and	sımilar amounts paid (list in Schedul	eO) _, -			10	*
	11		id to or for members		· · RE(CEIVED	· · · 1	
es	12	Salaries, o	her compensation, and employee be	nefits 🚰	٠			
Expenses	13		al fees and other payments to indepe				· <u>1</u> ;	.
ğ.	14		, rent, utilities, and maintenance .		ZI NUV.	0 . 9 . 2020		_
ш	15	• • •	blications, postage, and shipping .		· L		_1 . 1	
	16	•	nses (describe in Schedule O) ? .	1	OGE		7 <u>1</u> 0	
	17		nses. Add lines 10 through 16		· · · ·		<u>→</u> •• 1	
છ	18	Excess or	deficit) for the year (subtract line 17 f	rom line 9)		<i>.</i>	18	7,835
Set	19		or fund balances at beginning of year		column (A))	(must agre		
As		•	r figure reported on prior year's returi				· · 19	
Net Assets	20		ges in net assets or fund balances (e				20	
_	21	Net assets	or fund balances at end of year. Con	bine lines 18 thro	ugh 20 .	<u> </u>	. 🕨 2	1 15,446

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No. 10642I

Form **990-E∠** (2019)



Part II	Balance Sheets (see the instructions for Check if the organization used Schedule		ny question in this I	Part II		F
-		о то тоороно		(A) Beginning of year	(B) E	End of year
22 Ca	ash, savings, and investments		[5,634	22	15,44
	and and buildings				23	
24 Otl	ther assets (describe in Schedule O)				24	
	otal assets			5,634		15,44
	otal liabilities (describe in Schedule O)		<u> </u>		26	
	et assets or fund balances (line 27 of column			5,634	27	15,44
art III	Statement of Program Service Accomp			•	_	
L -1 '- 1L	Check if the organization used Schedule		<u> </u>		1	xpenses d for section
escribe measu	the organization's primary exempt purpose? the organization's program service accomplisured by expenses. In a clear and concise many program is the concise many program and concise many programs.	shments for each of anner, describe the	f its three largest pr	rogram services,	501(c)(3)	and 501(c)(4) tions, optional for
8 Prog the F in the (Grain		ntely 350 CRTEC stud onal Technology and rograms, or by the fa includes foreign gra	Education Center (Clacilities/maintenance ants, check here	RTEC), for use department	28a	96,40
COS to CO	gram Title Donation of cash. Benefits approximat SSA Regional Technology and Education Center (OSSA Academy, one of the career & technical pro	CRTEC), for use by s ograms, scholarship	student organizations s, or a special educat	that are integral ion program	200	44.101
0 Prog	ants \$) If this amount in gram Title Donation of CTE Clothing/Assistance as to needy COSSA Regional Technology and Educhasing shop clothing, and/or safety shoes, and/or	Benefited 4 CRTEC ucation Center (CRTE	EC) CTE students to a	: Donation of essist them in	29a	64,19
(Gra	ants\$) If this amount i		ants, check here .		30a	16
	er program services (describe in Schedule O)					
<u>,</u>	ants \$) If this amount is all program service expenses (add lines 28a than the service) is all program service expenses (add lines 28a than the service) is all programs are serviced in the service expenses.		ants, check here .		31a 32	160,766
	? (a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employ benefit plans, and deferred compensatio	other	mated amount of compensation
Harold	A. Nevill, Ph D , Executive Director	5	0		0	1
Tom Jo	ohnston, President	1	0		0	
David \	Van Wassenhove, Vice President	1	0		0	
Beverly	y Bauer, Secretary/Treasurer	2	0		0	
Roger	Reynoldson, Ph.D., Director	1	0		0	
Rob Ro	oberts, Director	1	0		0	
Curt Kr	rantz, Director	1	0		0	
					[_	



orm 99	90-EZ (2019)	\cup	P	age
Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this		٧.	
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		\ \
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34		
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		~
c b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b 35c		~
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		_
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions [37a] [37a] [37a]	\vdash		
ь 38а	Did the organization file Form 1120-POL for this year?	37b		_
b 39	If "Yes," complete Schedule L, Part II, and enter the total amount involved			
а	Initiation fees and capital contributions included on line 9	<u>,</u>		
b Юа	Gross receipts, included on line 9, for public use of club facilities	4		
b	section 4911 \triangleright 0; section 4912 \triangleright 0; section 4955 \triangleright 0 Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		_
1	List the states with which a copy of this return is filed ▶ Idaho			
			32-6074	
b	Located at ► CRTEC, 109 Penny Lane, Wilder, Idaho 83676 ZIP + 4 ► 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)?	83676 42b	Yes	_
	If "Yes," enter the name of the foreign country ► See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country ▶	42c		
3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. 1	>
4a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	N
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		_
C	Did the organization receive any payments for indoor tanning services during the year?	44c		`
d	explanation in Schedule O	44d		_
5a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		F.
	meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions	45b	1	-

Page	4

		ne organization engage, directly or includates for public office? If "Yes," co						Yes	No 🗸
Part V	1	Section 501(c)(3) Organizations All section 501(c)(3) organizations 50 and 51.	Only must answer que	estions 47–49b and	d 52, and	d complete th		for lin	
		Check if the organization used Sch	edule O to respond	to any question in	this Part	: VI		Yes	
		ne organization engage in lobbying a				ect during the	tax 47	res	No V
		organization a school as described in e organization make any transfers to					. 48 . 49a		V
50	Comp	s," was the related organization a sec plete this table for the organization's to pyees) who each received more than	five highest compen	sated employees (o	ther than			es, an	d key
		Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	(d) H contribu benefit p	lealth benefits, tions to employee lans, and deferred mpensation	(e) Estimat	ed amo	
None									
	·								
51	Comp	number of other employees paid ove plete this table for the organization's 000 of compensation from the organ	five highest comp	ensated independe		 ctors who each	h received	l more	than
	(a)	Name and business address of each independe	ent contractor	(b) Type of s	ervice	(c) Compensat	ion	
None									
52	Did t	number of other independent contraction complete Scheduleleted Schedule A				s must attac	0 ha . ⊳	. —	No
Under pe	nalties	of perjury, I declare that I have examined this red d complete Declaration of preparer (other than	eturn, including accompai officer) is based on all inf	nying schedules and state	ments, and	to the best of my k			
Sign			PND			Date Date	20		
Here	?.	Harold A. Nevill, Ph D., COSSA Four	ndation Executive Di	rector					
Paid Prepa	rer	Print/Type preparer's name	Preparer's signature		Date	Check self-emplo	- 1		
Use C		Firm's name ▶				Firm's EIN ▶			
	•	Firm's address ► discuss this return with the preparer	shown above? See	instructions		Phone no	► □ Ye	s 🗇	No

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

Inspection

Department of the Treasury Internal Revenue Service

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

Open to Public

OMB No 1545-0047

Name of the organization				İ	Employer Identification	number
Canyon-Owyhee School Service Agency	(COSSA) Foundat	ion, Incorporated			27-042	
Part I Reason for Public Cha						ns
The organization is not a private founda						(\a
1 A church, convention of church						O'I
2 A school described in section						
3 A hospital or a cooperative ho4 A medical research organization						iiil Enter the
hospital's name, city, and stat	e:	•				
5 An organization operated for section 170(b)(1)(A)(iv). (Com	plete Part II.)					al unit described in
 A federal, state, or local gover An organization that normally described in section 170(b)(1) 	receives a subs	tantial part of its sup				the general public
8 A community trust described i	n section 170(b)	(1)(A)(vi). (Complete I	Part II.)			
9 An agricultural research organ or university or a non-land-gra university:	ant college of agr	iculture (see instruction	ns). Ente	r the nam	ne, city, and state of	the college or
10 An organization that normally receipts from activities related support from gross investmen acquired by the organization a	l to its exempt fui it income and uni	nctions—subject to co related business taxal	ertain exc ole incom	eptions, e (less se	and (2) no more that ection 511 tax) from	n 33¹/₃% of its
11						
12						
of one or more publicly support of the control of t						
a Type I. A supporting organization supporting organization. Y	n(s) the power to	regularly appoint or e	lect a ma	jority of t		
b Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganızation vested ın	the same			
c Type III functionally integ its supported organization	grated. A suppor (s) (see instructio	ting organization oper ins). You must comp	ated in colete Part	onnectior IV, Secti	n with, and functiona ons A, D, and E.	ally integrated with,
d Type III non-functionally that is not functionally interequirement (see instructional see instruction)	grated. The orga	nization generally mu	st satisfy	a distribu	ition requirement an	
e Check this box if the organ functionally integrated, or	nization received	a written determination	on from th	ne IRS tha	at it is a Type I, Type	e II, Type III
f Enter the number of supported						
g Provide the following information						
(i) Name of supported organization	(u) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ir governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
		1	L			

Schedu	ıle A (Form 990 or 990-EZ) 2019						Page 2
Part	Support Schedule for Organiza (Complete only if you checked the Part III. If the organization fails to	ne box on line	e 5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	
Secti	ion A. Public Support	quality und	er the tests in	sted below, p	ilease comple	ste Fait III.)	
	ndar 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 received. (Do not include any "unusual grants.")	(a) Zoro	(3) 2313	(6) 25 17	(4) 2010	(,,2010	10, 10.00
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3				/		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
	ion B. Total Support			-			
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc.					12	
13	First five years. If the Form 990 is for th				•		
	organization, check this box and stop her						🟲 📙
	ion C. Computation of Public Suppor			11 001:000 (6)		14	%
14	Public support percentage for 2019 (line 6 Public support percentage from 2018 Sch					15	
15 16a	33 ¹ / ₃ % support test # 2019. If the organi box and stop here./The organization qual	zation did not	t check the bo	x on line 13, a	nd line 14 is 3	3 ¹ /3% or more	check this
b	331/3% support test—2018. If the organization this box and stop here. The organization	zation did not	check a box	on line 13 or 10	6a, and line 15	is 331/3% or n	nore, check
17a		019. If the org	anization did r s-and-circumst	not check a bo tances" test, c	ox on line 13, 1 heck this box	l6a, or 16b, an and stop here	d line 14 is Explain in
b	10%-facts-and-circumstances test—20 15 is/10% or more, and if the organiza Explain in Part VI how the organization in	ation meets the meets the "fac	ne "facts-and- cts-and-circum	circumstances istances" test.	" test, check The organizat	this box and	stop here.
	supported organization						- 📙
18	Private foundation. If the organization di instructions						

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(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.)

Secti	on A. Public Support						
Calen	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						
	received. (Do not include any "unusual grants.")	136104	35817	53097	119685	168601	513304
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the			İ			
	organization's tax-exempt purpose	o	0	o	o	o	0
3	Gross receipts from activities that are not an				·		
	unrelated trade or business under section 513	o	0	0	o	o	0
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities					•	
	furnished by a governmental unit to the						
	organization without charge	0	0	-	0	0	0
6	Total. Add lines 1 through 5	136104	35817	53097	119685	168601	513304
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .	0	0	0	0	0	0
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		•				•
	· ·	0	0	U	U	0	0
С 8	Add lines 7a and 7b	0	0	0	0	0	0
Ū	line 6.)						513304
Secti	on B. Total Support	I					313304
	dar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	136104	35817		119685	168601	513304
10a	Gross income from interest, dividends,				,		
	payments received on securities loans, rents,						
	royalties, and income from similar sources .	o	0	0	O	o	0
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	o	0
C	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						
	activities not included in line 10b, whether				i		
	or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or						
	loss from the sale of capital assets	_					
40	(Explain in Part VI.)	_0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)	40/404	25047	52007	110/05	1/0/01	F42204
14	First five years. If the Form 990 is for the	136104	35817	53097 d third fourth			513304 n 501(c)(3)
17	organization, check this box and stop he	-					
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2019 (line			13, column (fl)		15	100 %
16	Public support percentage from 2018 Sch		-				100 %
	on D. Computation of Investment In					•	<u> </u>
17	Investment income percentage for 2019 (y line 13, colu	mn (f))	17	0 %
18	Investment income percentage from 2018	3 Schedule A, f	Part III, line 17			18	0 %
19a	331/3% support tests-2019. If the organ	ization did not	check the box	k on line 14, ar	nd line 15 is m	ore than 331/39	
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2018. If the organization						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	id not check a	box on line 14	, 19a, or 19b, c	check this box	and see instru	ctions 🕨 🔲

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.)

	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete P	art V	.)	
Secti	on 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	- 4	
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	I .		
	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)	30		
•	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		ļ
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.	4c		
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;	ļ		
	(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).	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		
C	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	5c		
6	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.			
-		6		-
,	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	_	ļ	
	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	7	-	-
8	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	ļ	-
10a	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.	105		
h	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10a	╁	
D	Did the digulification have any exceed business heldings in the tax year (obe defication of Ferm True) to			

determine whether the organization had excess business holdings.)

10b

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	'-		1
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		
b	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		
Section	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			Ī
	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			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			
	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			1
	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			ì
	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			
	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).	<u> </u>		
_		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			ļ
	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	']
	supported organizations played in this regard.			لــــا
		3		
	on E. Type III Functionally Integrated Supporting Organizations		- 4 *	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	ctions	S).
a	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.	aaa in	otn rot	ional
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (SCC III	Yes	
2	Activities Test. Answer (a) and (b) below.		162	140
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 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.			
L		£a.		
þ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more 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		
^	•	-	 -	1
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
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? <i>Provide details in Part VI.</i>	3a		├─┤
_		Ja		
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 Organic	gani	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying	tru	st on Nov. 20, 1970 (expl	ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	izat	ions must complete Sect	ions A through E.
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		
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) 7 Other expenses (see instructions)	6		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount	1	(A) Prior Year	(B) Current Year (optional)
1 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		
b Average monthly cash balances	1b		
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 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 instructions).	ly in	tegrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	
Secti	on D—Distributions	1000		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	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
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.			
	Distributions to attentive supported organizations to whic	h the organization is res	ponsive	
_	(provide details in Part VI). See instructions.		F	
9	Distributable amount for 2019 from Section C, line 6			- · · · · · · · · · · · · · · · · · · ·
10	Line 8 amount divided by line 9 amount			
	on 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			
	From 2016			•
d	From 2017			
е	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
	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			
С	Remainder. Subtract lines 4a and 4b from 4.			
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 3 _j and 4c.			
8	Breakdown of line 7			
а	Excess from 2015			
b	Excess from 2016			
	Excess from 2017			
d				
	Excess from 2019			

Рa	ae	8

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 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

27-0427652 Canyon-Owyhee School Service Agency (COSSA) Foundation, Incorporated 990-EZ Part I. 1. During FY20 the COSSA Foundation received \$168,601 in total donations as follows: 8/12/2019 \$600 (estimated value) painting and crock pot. From Dr. Nevill. 8/14/2019. \$1,000 (actual value) cash. From Wilder Rod & Gun Club 8/19/2019. \$30,000 (estimated value) Aspenhaus "A" frame building. From Jerry McDaniel 8/23/2019. \$6,135 (estimated value) Three, 2-post, vehicle lifts. From Dennis Technical Center 9/10/2019 \$15,000 (estimated value) Kenworth diesel truck. From College of Western Idaho. 10/17/2019. \$155 (actual value) cash. From Karl Henry Memorial. 11/12/2019. \$5,000 (actual value) cash From Kenworth Sales. 11/13/2019. \$6,500 (estimated value) CAT3126 210 HP Engine. From Willard Watson. 11/15/2019. \$840 (actual value) cash. From NADA. 11/20/2019 \$2,500 (actual value) cash From Soutwest Idaho Legacy Organization (SILO). 11/22/2019. \$2,500 (estimated value) flight simulator. From Nampa Civil Air Patrol. 11/25/2019. \$50 11 (estimated value) frozen turkeys. From Homedale Albertsons Store 11/25/2019. \$374 92 (estimated value) frozen turkeys From Dr. Nevill. 11/25/2019. \$120 (estimated value) Recreation Center passes. From Dr. Nevill. 12/2/2019. \$100 (actual value) cash. From Leland Tiegs 12/2/2019. \$200 (actual value) cash. From Abe Dibben 12/13/2019. \$14,000 (actual value) cash. From the Batt Foundation. 12/13/2019. \$5,000 (actual vaue) cash. From the Wittenberger Foundation. 12/17/2019. \$1,109.16 (estimated value) classroom supplies. From Donna Benjamin 12/19/2019. \$5,000 (actual value) cash. From the Batt Foudation. 12/19/2019 \$1,360 (estimated value) daycare supplies. From Andrea McRae. 12/19/2019. \$2,500 (actual value) cash. From Western Freightliner. 12/20/2019. \$500 (actual value) cash. From Parma Hurricanes. 12/20/2019, \$50 (actual vaue) cash. From Joyce Howell.

Continued on Schedule O, Page 2.

Name of the organization	Employer identification number	
Canyon-Owyhee School Service Agency (COSSA) Foundation, Incorporated	27-0427652	
COS ET D. M. A. Carellana I		
990-EZ Part I. 1. Continued.		
1/13/2020. \$760 (estimated value) coats, jackets, boots. From St. Vinicent dePaul	·	
2/10/2020. \$9,266 94 (estimated value) hydraulic and electrical supplies. From Dillon Toyota Lift.		
2/10/2020. \$7,200 74 (estinated value) nydraunc and electrical supplies. From Dillon Toyota Lint.		
2/13/2020. \$6,471.70 (estimated value) insulation. From Northwest Interiors.		
2/27/2020. \$208 (estimated value) bench and dumbbells From Gym Outfitters.		
ELECTION OF THE SECOND CONTRACT CONTRAC		
3/9/2020 \$15,000 (actual value) cash From Jeker Foundation.		
4/1/2020 \$10,000 (actual value) cash. From United Way of Treasure Valley.		
4/10/2020. \$4,000 (estimated value) waiver of sewer hook-up fee. From City of Wilder, Idaho.		
4/24/2020. \$5,000 (estimated value) 10 HP Elitebook laptops From Idaho Business for Educators.		
4/28/2020. \$6,950 (estimated value) Cafe' tables and floor cleaner. From Vallivue School District #139.		
5/29/2020. \$9,000 (actual value) cash. From Idaho State Department of Education McKinney-Vento Grant	·	
6/1/2020. \$600 (actual value) cash. From Mark Cecotti.		
oi 112020. 3000 (actual value) cash. From Mark Cecotti.		
6/2/2020 \$750 (actual value) cash. From United Way of Treasure Valley.		
990-EZ Part I. 18 Excess for year = \$7835 One Batt Scholarship (\$8000) was not awarded by the end of FY	20 due to the COVID-19	
crisis (\$7000 of the \$8000 from this fiscal year) \$835 of the 8/14/2019 Wilder Rod & Gun Club donation ren	nained unspent.	
990-EZ Part I 20 Other changes in fund balance = \$1977 Lewis-Clark State College returned \$1000 in sch	olarship funds previously awarded	
in FY19 but not used by the recipient \$977 in unobligated funds from FY20 remained in the Foundation ch	ecking account.	
990-EZ Part I. 21 Net Assets at end of FY20 = \$15,446 \$7835 excess (line 18), \$5634 beginning of year (line	19), and \$1977 other (line 20).	
990-EZ Part III. 28 During FY20 COSSA Foundation donated following items to COSSA Regional Technology	y and Education Center (CRTEC):	
8/12/2019, \$600 (estimated value) painting and crock pot, donated to COSSA for use in the district office	<u>:</u>	
8/19/2019 \$30,000 (estimated value) Aspenhaus "A" frame building, donated to CRTEC Residential Con-	struction program of study.	
9/32/2010 \$4.135 (actimated value) Three 2 part valued lifts denoted to CDTEC Auto and Dissel pro-	ame of study	
8/23/2019. \$6,135 (estimated value) Three, 2-post, vehicle lifts, donated to CRTEC Auto and Diesel progr	ama vi atuuy.	
9/10/2019. \$15,000 (estimated value) Kenworth diesel truck, donated to CRTEC Diesel program of study		
Continued on Schedule O, Page 3		

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.

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OMB No. 1545-0047

2019

Open to Public Inspection

Employer identification number

Canyon-Owyhee School Service Agency (COSSA) Foundation, Incorporated 27-0427652 990-EZ Part III, 28. Continued: 11/13/2019 \$6,500 (estimated value) CAT3126 210 HP Engine, donated to CRTEC Diesel program of study. 11/22/2019. \$2,500 (estimated value) flight simulator, donated to CRTEC Pre-Engineering program of study. 11/25/2019. \$50.11 (estimated value) frozen turkeys, donated to COSSA Academy for Holiday Food Baskets. 11/25/2019. \$374 92 (estimated value) frozen turkeys, donated to COSSA Academy for Holiday Food Baskets. 11/25/2019. \$120 (estimated value) Recreation Center passes, donated to COSSA Education Association for Holiday Gift Baskets. 12/17/2019 \$1,109.16 (estimated value) classroom supplies, donated to COSSA Academy for Rtl classroom. 12/19/2019. \$1,360 (estimated value) daycare supplies, donated to COSSA Academy Daycare 1/13/2020. \$760 (estimated value) coats, jackets, boots, donated to COSSA Academy Community School Clothes Closet 2/10/2020 \$9,266 94 (estimated value) hydraulic and electrical supplies, donated to CRTEC Pre-Engineering program of study. 2/13/2020. \$6,471.70 (estimated value) insulation, donated to CRTEC Residential Construction program of study. 2/27/2020. \$208 (estimated value) bench and dumbbells, donated to CRTEC Law Enforcement program of study. 4/10/2020. \$4,000 (estimated value) waiver of sewer hook-up fee, donated to COSSA Facilities for Residential Construction utility project. 4/24/2020. \$5,000 (estimated value) 10 HP Elitebook laptops, donated to COSSA Academy for remote delivery during COVID crisis 4/28/2020. \$6,950 (estimated value) Cafe' tables and floor cleaner, donated to COSSA Academy Maintenance/Facilities. 990-EZ Part III, 29 During FY20 COSSA Foundation donated \$65,195 cash to COSSA Regional Technology and Education Center (CRTEC) as follows: 10/17/2019 \$155 (actual value) cash, donated to CRTEC Welding SkillsUSA student account 11/12/2019. \$5,000 (actual value) cash, donated to CRTEC Diesel program of study. `11/15/2019 \$840 (actual value) cash, donated to CRTEC Diesel program of study 11/20/2019 \$2,500 (actual value) cash, donated to COSSA Academy Library. 12/2/2019. \$100 (actual value) cash From Leland Tiegs, donated to CRTEC Welding SkillsUSA student account 12/2/2019. \$200 (actual value) cash, donated to CRTEC Automotive SkillsUSA student account 12/13/2019. \$5,000 (actual vaue) cash, donated to COSSA Academy Library

Schedule O (Form 990 or 990-EZ) (2019)

Continued on Schedule O, Page 4.