

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.
▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning **JUL 1, 2015** and ending **JUN 30, 2016**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization THE SCHOOL FOUNDATION, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 320 WEST CHEVES STREET 175 City or town, state or province, country, and ZIP or foreign postal code FLORENCE, SC 29501 F Name and address of principal officer: JEFF HELTON SAME AS C ABOVE	D Employer identification number 57-1092759 E Telephone number (843)-662-9996 G Gross receipts \$ 985988. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: ▶ THESCHOOLFOUNDATION.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ L Year of formation: 2000 M State of legal domicile: SC		

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: THE SCHOOL FOUNDATION, INC. ("ASSOCIATION") IS A VOLUNTARY ASSOCIATION OF INDIVIDUALS OPERATED			
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3		22
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		22
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5		2
	6 Total number of volunteers (estimate if necessary)	6		50
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.
	7b Net unrelated business taxable income from Form 990-T, line 34	7b		0.
Revenue	8 Contributions and grants (Part VIII, line 1h)	108843.	Prior Year	199966.
	9 Program service revenue (Part VIII, line 2g)	0.	Current Year	0.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	99264.		14297.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	94335.		0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	302442.		214263.
	Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	129004.	
14 Benefits paid to or for members (Part IX, column (A), line 4)		0.		0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		39959.		51654.
16a Professional fundraising fees (Part IX, column (A), line 11e)		0.		0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 17214.				
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		54424.		59451.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	223387.		229111.	
19 Revenue less expenses. Subtract line 18 from line 12	79055.		-14848.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	2022203.	Beginning of Current Year	1973062.
	21 Total liabilities (Part X, line 26)	9670.	End of Year	830.
	22 Net assets or fund balances. Subtract line 21 from line 20	2012533.		1972232.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer JEFF HELTON, CHAIRMAN Type or print name and title	Date	
Paid Preparer Use Only	Print/Type preparer's name ALBERT A. MUNN, IV, CPA	Preparer's signature	Date
	Firm's name ▶ MUNN & ASSOCIATES, PC	Firm's EIN ▶ 57-0902671	Check if self-employed <input type="checkbox"/> PTIN P00354493
	Firm's address ▶ 1461 WEST EVANS STREET FLORENCE, SC 29501	Phone no. 843-678-9544	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: THE SCHOOL FOUNDATION PROMOTES EDUCATIONAL EXCELLENCE IN FLORENCE, S.C. SCHOOL DISTRICT 1 THROUGH GRANTS FOR INNOVATIVE LEARNING AND THROUGH HIGH IMPACT INITIATIVES DESIGNED TO PREPARE ALL STUDENTS FOR SUCCESS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 115523. including grants of \$ 115523.) (Revenue \$) THE MAJOR GRANTS OF THE SCHOOL FOUNDATION ARE AS FOLLOWS:

A MAGICAL AND REVOLUTIONARY APPROACH IN LEARNING FOREIGN LANGUAGES -\$40,386.38 KIRSTEN WASHINGTON, ROCIO BROWN, OSCAR BETANCUR- WILLIAMS MIDDLE SCHOOL

THE PURPOSE OF THIS GRANT IS TO PROVIDE BETTER, MORE COMPREHENSIVE, INTENSIFIED FOREIGN LANGUAGE INSTRUCTIONS THAT ALLOW STUDENTS TO IMPROVE THEIR COMMUNICATION SKILLS, SHARPEN THEIR LISTENING COMPREHENSION, IMPROVE THEIR PRONUNCIATION, BE ENGAGED AND INVOLVED, AND GAIN THE CONFIDENCE TO SPEAK IN A FOREIGN LANGUAGE. THE BENEFITS OF LANGUAGE LABS ARE FAR REACHING AND EXTEND BEYOND THE CLASSROOM.

4b (Code:) (Expenses \$ 243. including grants of \$ 2483.) (Revenue \$) THE MINI-GRANTS ARE AS FOLLOWS:

BOOKBAGS WITH S.W.A.G. - \$500 LILLIAN SMITH - NORTH VISTA ELEMENTARY SCHOOL

BOOKBAGS WITH S.W.A. G. PROVIDES STUDENTS WITH AN OPPORTUNITY TO PRACTICE INDIVIDUAL SKILLS AT HOME AND ENCOURAGES PARENTS TO GET ACTIVELY INVOLVED WITH THEIR CHILD'S EDUCATION. THIS FOSTERS HEALTHY PARENTAL INVOLVEMENT AND EVERYONE BENEFITS WHEN SCHOOLS AND FAMILIES WORK TOGETHER TO BUILD STUDENT SUCCESS! FOR THIS PROJECT, EACH BOOKBAG WILL INCLUDE ACTIVITIES FOR STANDARDS THAT STUDENTS NEED THE MOST SUPPORT WITH TO MEET GRADE LEVEL PROFICIENCY. SKILLS WILL BE REINFORCED

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 118006.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
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? <i>If "Yes," complete Schedule C, Part II</i>		X
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f 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)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 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? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 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	X	
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		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		X
26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
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):		
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
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? If "Yes," complete Schedule R, Part I		X
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		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
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		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Main form table with columns for line numbers, descriptions, and Yes/No boxes. Includes sections for backup withholding, employee reporting, foreign accounts, prohibited transactions, and 501(c)(7) and (12) organizations.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	1a	22	
b	Enter the number of voting members included in line 1a, above, who are independent		
	1b	22	
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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 in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done		X
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
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?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **SC**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: **COURTNEY CRIBB, TREASURER - (843)-662-9996**
320 WEST CHEVES STREET, FLORENCE, SC 29501

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JEFF HELTON CHAIRMAN	15.00	X		X				0.	0.	0.
(2) ED A LOVE VICE CHAIRMAN	15.00	X		X				0.	0.	0.
(3) COURTNEY CRIBB TREASURER	15.00	X		X				0.	0.	0.
(4) MARION FORD SECRETARY	15.00	X		X				0.	0.	0.
(5) DEBBIE HYLER EXECUTIVE DIRECTOR	40.00	X		X			63926.	0.	0.	0.
(6) DR. LEAH BARLEY BOARD MEMBER	5.00	X					0.	0.	0.	0.
(7) DR ANNIE BROWN BOARD MEMBER	5.00	X					0.	0.	0.	0.
(8) DR. RANDY BRIDGES BOARD MEMBER	5.00	X					0.	0.	0.	0.
(9) TRISHA CAULDER BOARD MEMBER	5.00	X					0.	0.	0.	0.
(10) DEB DAVIS BOARD MEMBER	5.00	X					0.	0.	0.	0.
(11) BRET GREER BOARD MEMBER	5.00	X					0.	0.	0.	0.
(12) RICHARD HARRINGTON BOARD MEMBER	5.00	X					0.	0.	0.	0.
(13) CHARLIE JORDAN BOARD MEMBER	5.00	X					0.	0.	0.	0.
(14) JEAN LEATHERMAN BOARD MEMBER	5.00	X					0.	0.	0.	0.
(15) ROBERT LEMASTER BOARD MEMBER	5.00	X					0.	0.	0.	0.
(16) TAMMY H PAWLOSKI BOARD MEMBER	5.00	X					0.	0.	0.	0.
(17) JAMES SHEEHY BOARD MEMBER	5.00	X					0.	0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MIKE SKARUPA BOARD MEMBER	5.00	X						0.	0.	0.
(19) JEFF STEVENS BOARD MEMBER	5.00	X						0.	0.	0.
(20) PORTER STEWART BOARD MEMBER	5.00	X						0.	0.	0.
(21) MINDY TAYLOR BOARD MEMBER	5.00	X						0.	0.	0.
(22) BRENT TILLER BOARD MEMBER	5.00	X						0.	0.	0.
(23) DR SURESH TIWARI BOARD MEMBER	5.00	X						0.	0.	0.
(24) CARLOS WASHINGTON BOARD MEMBER	5.00	X						0.	0.	0.
(25) KATIE WILCOX BOARD MEMBER	5.00	X						0.	0.	0.
1b Sub-total								63926.	0.	0.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								63926.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns						
	1 b	Membership dues						
	1 c	Fundraising events	162735.					
	1 d	Related organizations						
	1 e	Government grants (contributions)						
	1 f	All other contributions, gifts, grants, and similar amounts not included above	37231.					
	g	Noncash contributions included in lines 1a-1f: \$	22700.					
	h	Total. Add lines 1a-1f	199966.					
	Program Service Revenue	2 a						
2 b								
2 c								
2 d								
2 e								
2 f		All other program service revenue						
g		Total. Add lines 2a-2f						
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	59470.	59470.				
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	(i) Real					
			(ii) Personal					
			b	Less: rental expenses				
			c	Rental income or (loss)				
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	586580.				
			(ii) Other					
			b	Less: cost or other basis and sales expenses	631753.			
			c	Gain or (loss)	-45173.			
	d	Net gain or (loss)	-45173.	-45173.				
	8 a	Gross income from fundraising events (not including \$ 162735. of contributions reported on line 1c). See Part IV, line 18	a	139972.				
			b	Less: direct expenses	139972.			
c			Net income or (loss) from fundraising events		0.			
9 a	Gross income from gaming activities. See Part IV, line 19	a						
		b	Less: direct expenses					
		c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a						
		b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory					
Miscellaneous Revenue		Business Code						
11 a		a						
		b						
		c						
		d	All other revenue					
		e	Total. Add lines 11a-11d					
12	Total revenue. See instructions.		214263.	14297.	0.	0.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	118006.	118006.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	38356.		22374.	15982.
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	9601.		9601.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes	3697.		2465.	1232.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	8140.		8140.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	14242.		14242.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)				
12 Advertising and promotion	10315.		10315.	
13 Office expenses	392.		392.	
14 Information technology				
15 Royalties				
16 Occupancy	11136.		11136.	
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	4582.		4582.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	587.		587.	
23 Insurance	860.		860.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	2659.		2659.	
b SUPPLIES	2551.		2551.	
c EQUIPMENT EXPENSE AND M	2260.		2260.	
d DUES & SUBSCRIPTIONS	1727.		1727.	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	229111.	118006.	93891.	17214.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here if following SOP 98-2 (ASC 958-720)

Part 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
Assets	1		1	
	2	58326.	2	42980.
	3		3	
	4	9865.	4	1246.
	5		5	
	6		6	
	7		7	
	8		8	
	9	268.	9	1094.
	10a	10a 11915.		
	b	10b 11567.	935.	10c 348.
	11		11	
	12		12	1927394.
	13		13	
	14		14	
	15		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2022203.	16	1973062.
Liabilities	17	9670.	17	830.
	18		18	
	19		19	
	20		20	
	21		21	
	22		22	
	23		23	
	24		24	
	25		25	
	26	Total liabilities. Add lines 17 through 25	9670.	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27	2007533.	27	1966432.
	28	5000.	28	5800.
	29		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30		30	
	31		31	
	32		32	
33	2012533.	33	1972232.	
34	2022203.	34	1973062.	

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	214263.
2	Total expenses (must equal Part IX, column (A), line 25)	2	229111.
3	Revenue less expenses. Subtract line 2 from line 1	3	-14848.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2012533.
5	Net unrealized gains (losses) on investments	5	-25454.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1972232.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Form 990 (2015)

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.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization **THE SCHOOL FOUNDATION, INC.** Employer identification number **57-1092759**

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 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).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 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)**.
- 7 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.)
- 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g.
 - a **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.**
 - 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.**
 - 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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations

g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	48695.	26913.	27683.	102843.	199966.	406100.
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 ...	6000.	6000.	6000.	6000.	6000.	30000.
4 Total. Add lines 1 through 3	54695.	32913.	33683.	108843.	205966.	436100.
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.						436100.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	54695.	32913.	33683.	108843.	205966.	436100.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	88054.	50161.	49396.	99264.	14297.	301172.
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						737272.
12 Gross receipts from related activities, etc. (see instructions)					12	1366299.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	59.15 %
15 Public support percentage from 2014 Schedule A, Part II, line 14	15	33.28 %
16a 33 1/3% support test - 2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or 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 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 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.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b **33 1/3% support tests - 2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 **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 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section 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.		
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).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
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.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
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.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
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).		
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?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 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 .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).		
8 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).		
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 .		
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 .		
c 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 .		
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.		
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.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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	
c 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 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 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 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 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 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 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).	2	
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's 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.	3	

Section 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 instructions):		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a 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.	2a	
b 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	
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a 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	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections 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)	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)
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-functionally-integrated Type III supporting organization (see instructions).

Schedule A (Form 990 or 990-EZ) 2015

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2015:			
a			
b			
c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2015 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2015, if any. Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions).			
6 Remaining underdistributions for 2015. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions).			
7 Excess distributions carryover to 2016. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b			
c Excess from 2013			
d Excess from 2014			
e Excess from 2015			

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.)

Blank lined area for supplemental information.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Name of the organization

THE SCHOOL FOUNDATION, INC.

Employer identification number

57-1092759

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

THE SCHOOL FOUNDATION, INC.

57-1092759

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FLORENCE-DARLINGTON TECHNICAL COLLEGE 2715 WEST LUCAS STREET FLORENCE, SC 29501	\$ 6000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
2	DEBORAH DAVIS 4201 SOUTHBOROUGH ROAD FLORENCE, SC 29501	\$ 5200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	ASSURANT SPECIALTY PROPERTY 1323 CELEBRATION BLVD FLORENCE, SC 29501	\$ 23450.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	HONDA OF SOUTH CAROLINA MFG., INC. 1111 HONDA WAY TIMMONSVILLE, SC 29161	\$ 13250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	MARY ALICE INGRAM CHARITABLE LEAD UNITRUST P O BOX 1109 FLORENCE, SC 29503	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	MCLEOD HEALTH P O BOX 100551 FLORENCE, SC 29501	\$ 7750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE SCHOOL FOUNDATION, INC.	Employer identification number 57-1092759
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	PGBA, LLC P O BOX 4307 FLORENCE, SC 29501	\$ 7900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	PEE DEE ELECTRIC COOPERATIVE P O BOX 491 DARLINGTON, SC 29540	\$ 6900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	ROCHE CAROLINA, INC 6173 EAST OLD MARION HIGHWAY FLORENCE, SC 29506	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	TOLEDO CAROLINA, INC. P O BOX 12366 FLORENCE, SC 29504	\$ 5000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	ADAMS OUTDOORS 38 N MAIN STREET SUMTER, SC 29150	\$ 10000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
12	MORNING NEWS 310 S DARGAN STREET FLORENCE, SC 29501	\$ 5000.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization THE SCHOOL FOUNDATION, INC.	Employer identification number 57-1092759
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	<u>OFFICE SPACE DONATED</u> _____ _____	\$ <u>6000.</u>	<u>06/30/16</u>
11	<u>BILLBOARD ADVERTISING FOR GALA</u> _____ _____	\$ <u>10000.</u>	<u>05/15/16</u>
12	<u>NEWSPAPER ADVERTISING</u> _____ _____	\$ <u>5000.</u>	<u>05/15/16</u>
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization THE SCHOOL FOUNDATION, INC.	Employer identification number 57-1092759
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

THE SCHOOL FOUNDATION, INC.

Employer identification number

57-1092759

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 for total number, aggregate value of contributions, aggregate value of grants, and aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part 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 organization (check all that apply).
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year.
4 Number of states where property subject to conservation easement is located.
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year.
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition
- b Scholarly research
- c Preservation for future generations
- d Loan or exchange programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment _____ %
- b Permanent endowment _____ %
- c Temporarily restricted endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		11915.	11567.	348.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 348.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) PUBLICALLY TRADED		
(B) MARKETABLE SECURITIES		
(C) (MUTUAL FUNDS)	1927394.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1927394.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (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 footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 174567, adjusted to 214263.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 214869, adjusted to 229111.

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Series of horizontal lines provided for entering supplemental information.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public Inspection

Name of the organization

THE SCHOOL FOUNDATION, INC.

Employer identification number

57-1092759

Part I

Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** Mail solicitations
- b** Internet and email solicitations
- c** Phone solicitations
- d** In-person solicitations
- e** Solicitation of non-government grants
- f** Solicitation of government grants
- g** Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total	▶					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		ANNUAL CELEBRATION (event type)	DANCING WITH THE STARS (event type)	NONE (total number)		
Revenue	1	Gross receipts	115825.	186882.		302707.
	2	Less: Contributions	34866.	127869.		162735.
	3	Gross income (line 1 minus line 2)	80959.	59013.		139972.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes		1163.		1163.
	6	Rent/facility costs	4225.	8904.		13129.
	7	Food and beverages	21183.	19133.		40316.
	8	Entertainment				
	9	Other direct expenses	55551.	29813.		85364.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				139972.
	11	Net income summary. Subtract line 10 from line 3, column (d)				0.

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7	Direct expense summary. Add lines 2 through 5 in column (d)				
	8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

13a		%
13b		%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____ .

c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).

Part IV Supplemental Information *(continued)*

Lined area for supplemental information, currently blank.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

THE SCHOOL FOUNDATION, INC.

Employer identification number
57-1092759

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II 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.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLIAMS MIDDLE SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		40386.	0.			A MAGICAL AND REVOLUTIONARY APPROACH IN LEARNING FOREIGN LANGUAGES
JOHN W MOORE INTERMEDIATE SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		39489.	0.			CHROMEBOOK CLASSROOMS: IMPACTING OUR COMMUNITY THROUGH DIGITAL LITERACY
WILSON HIGH SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		26326.	0.			CHROMEBOOKS AND SCIENCE LITERACY
SOUTHSIDE MIDDLE SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		5321.	0.			SMART TABLE FOR SMART KIDS
NORTH VISTA ELEMENTARY SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		500.	0.			BOOKBAGS WITH S W A G
ROYALL ELEMENTARY SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		500.	0.			AUTHORS AT WORK

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

3 Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2015)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II).

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LUCY T DAVIS ELEMENTARY SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		483.	0.			READY, SET, READ
DELMAE ELEMENTARY SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		500.	0.			MOVE IT!
NORTH VISTA ELEMENTARY SCHOOL 319 SOUTH DARGAN STREET FLORENCE, SC 29501	57-6000231		500.	0.			THE POWER OF STEAM
FLORENCE SCHOOL DISTRICT ONE CHILD DEVELOPMENT CENTER - 319 SOUTH DARGAN STREET - FLORENCE, SC 29501	57-6000231		4000.	0.			BOOKS FOR CHILD DEVELOPMENT INITIATIVE

THE SCHOOL FOUNDATION, INC.

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.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Open to Public
Inspection

Name of the organization

THE SCHOOL FOUNDATION, INC.

Employer identification number
57-1092759

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

COLLECTIVELY TO SERVE THE NEEDS AND INTERESTS AND ADVANCE THE GENERAL
WELFARE TO THE FLORENCE, SOUTH CAROLINA SCHOOL DISTRICT NUMBER ONE.

THE ASSOCIATION PROMOTES EXCELLENCE IN FLORENCE SCHOOL DISTRICT NUMBER
ONE THROUGH GRANTS FOR INNOVATIVE AND HIGH IMPACT PROGRAMS DESIGNED TO
BENEFIT ALL CHILDREN.

THE ORGANIZATION ACHIEVES ITS GOALS BY CONTRIBUTIONS TO SCHOOLS, SCHOOL
PROGRAMS AND ADVOCACY OF QUALITY PUBLIC EDUCATION.

THE ASSOCIATION WELCOMES EVERYONE IN FLORENCE SCHOOL DISTRICT NUMBER
ONE WHICH IS A PUBLIC SCHOOL SYSTEM, REGARDLESS OF AGE, RACE, SEX,
ETHNICITY, ABILITY OR RELIGION.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

STUDENTS ARE ABLE TO TALK AND TO RECEIVE FEEDBACK PRIVATELY, THEY ARE
ABLE TO LISTEN TO ACTIVITIES INDIVIDUALLY WITHOUT DISTRACTING NOISES
INSIDE A CLASSROOM, AND ARE ABLE TO SELF-CORRECT WITH CERTAIN FEATURES
A LANGUAGE LAB OFFERS. TEACHERS CAN MONITOR STUDENT PROGRESS, CAN
TAILOR INSTRUCTIONS TO MEET INDIVIDUAL NEEDS, PROVIDE RICHER
INSTRUCTIONS, AND FOCUS ON THE ESSENTIAL SKILL OF LEARNING A FOREIGN
LANGUAGE, WHICH IS TO COMMUNICATE AND TO UNDERSTAND THE SPOKEN
LANGUAGE. A LANGUAGE LAB CAN CHALLENGE HIGH-PERFORMING STUDENTS AND AID
LOW-PERFORMING STUDENTS. STUDENTS ARE ABLE TO WORK AT THEIR OWN PACE
AND THEIR LEARNING IS NO LONGER INTERRUPTED BY EXPLANATIONS OR TEACHER

Name of the organization

THE SCHOOL FOUNDATION, INC.

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COMMANDS THAT MAY NOT BE APPLICABLE TO THEM.

A LANGUAGE LAB WILL IMPROVE OUR STUDENTS' RATE OF LEARNING A FOREIGN LANGUAGE, THEIR MOTIVATION, AND THEIR PERFORMANCE IN REQUIRED LANGUAGE CLASSES WHEN ENTERING COLLEGE. WE ARE A GLOBAL ECONOMY AND SHOULD PREPARE OUR CHILDREN TO BE COMPETITIVE IN THE GLOBAL WORKFORCE, WHICH OFTEN REQUIRES BEING ABLE TO SPEAK FOREIGN LANGUAGES. WE ARE INTRODUCING FOREIGN LANGUAGES TO STUDENTS AT A LATER AGE THAN MOST COUNTRIES, WHICH LEAVES CHILDREN LESS CAPABLE TO COMPETE WITH STUDENTS FROM OTHER COUNTRIES THAT TEACH LANGUAGES IN KINDERGARTEN OR ELEMENTARY SCHOOL. THEREFORE, TEACHERS NEED TO PREPARE STUDENTS AND HAVE TOOLS AVAILABLE TO BRIDGE THIS GAP AND PROVIDE THE BEST AND MOST QUALITY INSTRUCTIONS THAT THEY CAN POSSIBLY PROVIDE. IT IS WELL KNOWN THAT TECHNOLOGY CAN ENHANCE INSTRUCTIONS AND THIS CONCEPT HAS BEEN ADAPTED THROUGHOUT OTHER SUBJECTS, BUT HAS NOT BEEN GIVEN A PRIORITY IN FOREIGN LANGUAGE COURSES.

NOT ONLY CAN THIS LANGUAGE LAB HELP ALL OUR STUDENTS, IT CAN ALSO BE A MODEL FOR MODERN LANGUAGE INSTRUCTIONS AND ACTIVELY ENGAGE OTHER TEACHERS, FRANCIS MARION STUDENTS, AND OTHER INTERESTED PARTIES THROUGHOUT THE STATE. WORKSHOPS COULD BE PROVIDED; HANDS-ON TRAINING COULD BE OFFERED TO ILLUSTRATE THE BENEFITS AND THE POTENTIALS OF TECHNOLOGY IN REGARDS TO TEACHING AND LEARNING A FOREIGN LANGUAGE. THE PROCEDURES INVOLVED WITH THIS GRANT INCLUDE PURCHASING ALL THE NECESSARY COMPONENTS OF A LANGUAGE LAB, INSTALLING THE SOFTWARE, AND RECEIVING TRAINING ON HOW TO USE IT EFFECTIVELY. THE EXPECTED BENEFITS INCLUDE BUT ARE NOT LIMITED TO ENHANCED STUDENT LEARNING, DRAMATIC INCREASES IN STUDENT MOTIVATION, INCREASE IN TEACHER EFFECTIVENESS, OUTREACH OPPORTUNITIES TO OTHER FOREIGN LANGUAGE TEACHERS/STUDENTS WITHIN THE STATE, AND THE POTENTIAL TO SERVE AS A MODEL FOR OTHER

Name of the organization THE SCHOOL FOUNDATION, INC.	Employer identification number 57-1092759
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SCHOOLS.

CHROMEBOOK CLASSROOMS: IMPACTING OUR COMMUNITY THROUGH DIGITAL LITERACY

- \$39,489.12

ROBYN HEFFERNAN - JOHN W. MOORE INTERMEDIATE SCHOOL

GOOGLE APPS FOR EDUCATION, PARTICULARLY GOOGLE CLASSROOM, IS AN EXCELLENT WAY TO ENGAGE STUDENTS THROUGH DIGITAL LITERACY IN A CHROMEBOOK CLASSROOM. THROUGH GOOGLE APPS TEACHERS WILL SET UP THEIR OWN CLASSROOM WHERE STUDENTS WILL DIRECT THEIR OWN INSTRUCTION BY CHOOSING WHAT THEY WANT TO LEARN AND HOW THEY WILL CONVEY THAT LEARNING TO THEIR TEACHER. GOOGLE CLASSROOM CREATES A SAFE ENVIRONMENT WHERE STUDENTS CAN WORK SIMULTANEOUSLY ON SHARED DOCUMENTS, RESPOND TO ONE ANOTHER THROUGH WRITTEN CONVERSATIONS OR "THREADS", COLLABORATE TO PRODUCE PRODUCTS THAT CAN BE SHARED AMONGST THEIR PEERS, AND TO SUBMIT WORK ELECTRONICALLY TO THEIR TEACHERS SO THEY CAN THEN CRITIQUE AND SCORE. THIS PROVIDES STUDENTS WITH EXPLICIT AND INSTANT FEEDBACK THAT WILL DRIVE THE STUDENT INDIVIDUAL PROCESS FOR LEARNING. THIS TYPE OF BLENDED CLASSROOM, THROUGH THE USE OF GOOGLE CLASSROOM AND GOOGLE APPS FOR EDUCATION, WILL PROVIDE INNOVATIVE OPPORTUNITIES FOR STUDENTS AND TEACHERS TO BE ENGAGED IN THE LITERACY PROCESS OF READING, WRITING, AND COMMUNICATING. CHROMEBOOK CLASSROOMS WILL MEET THE NEEDS OF OUR TECH SAVVY STUDENTS WHILE ALSO ADDRESSING THE NEEDS OF OUR STUDENTS WHO LIVE BELOW THE POVERTY LEVEL AND DON'T HAVE ACCESS TO TECHNOLOGY AT HOME. CHROMEBOOK CLASSROOMS IS THE CHANGE WE MUST MAKE FOR ALL OF OUR STUDENTS.

TEACHERS WILL USE GOOGLE CLASSROOM AS A PORTAL FOR PROJECT BASED LEARNING WHERE THE PROCESS OF LEARNING IS VALUED MORE THAN THE FINAL

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PRODUCT. WE WILL SUPPORT OUR STUDENTS IN THEIR STRUGGLE TO LEARN DIFFICULT CONCEPTS AND READ COMPLEX MULTIMODAL TEXT BY PROVIDING CHOICE, CLARITY OF EXPECTATIONS AND EXPLICIT FEEDBACK THAT GUIDES THE LEARNING INSTEAD OF WAITING UNTIL THE END TO CRITICIZE THE PRODUCT. THROUGH GOOGLE CLASSROOM STUDENTS WILL ENGAGE IN ACTIVITIES WHERE THEY WILL INDIVIDUALLY USE THEIR OWN CHROMEBOOK TO SIMULTANEOUSLY WORK ON COLLABORATIVE DOCUMENTS, SLIDESHOWS, NET THREADS, AND SO MUCH MORE. STUDENTS WILL BE EXPECTED TO CORRESPOND WITH EACH OTHER THROUGH NET THREADS SET UP BY THEIR TEACHER THAT WILL NOT ONLY PROVIDE INSIGHT TO THE STUDENTS' KNOWLEDGE BUT WILL ALSO PROVIDE THE OPPORTUNITY TO PRACTICE SOCIAL MEDIA SKILLS OF COMMUNICATING PROPERLY WITH EACH OTHER. STUDENTS NEED TO LEARN ABOUT THE RESPONSIBILITY THEY HAVE WHEN THEY COMMUNICATE ONLINE. NET THREADS WILL BE DESIGNED TO PRACTICE THE SKILL OF ARGUING PROFESSIONALLY AND DEFENDING YOUR OWN OPINIONS WHILE UNDERSTANDING THE OPINIONS OF OTHERS. ALL OF THIS WILL BE TAUGHT THROUGH THE USE OF ACCOUNTABILITY FOR WHAT YOU WRITE AND RESPECT FOR OTHERS. THIS IS A SKILL SET THAT OUR STUDENTS NEED. THIS IS HOW WE WILL ENGAGE STUDENT THROUGH DIGITAL LITERACY IN OUR CHROMEBOOK CLASSROOM.

CHROMEBOOKS AND SCIENCE LITERACY - \$26,326.08

MARY HOPPER, JEAH WOLFE - WILSON HIGH SCHOOL

THIS GRANT WILL ALLOW THE 9TH GRADE SCIENCE TEACHERS AT WILSON HIGH SCHOOL TO PURCHASE 2 CHROMEBOOK CARTS AND THE CHROMEBOOKS TO GO IN THE CARTS. THE 9TH GRADE PHYSICAL SCIENCE TEACHERS AT WILSON HIGH SCHOOL HAVE FLIPPED THEIR CLASSROOMS. THE FLIPPED LEARNING ENVIRONMENT IS ONE WHERE THE TRADITIONAL TEACHING TAKES PLACE AT HOME AND THE CLASSROOM

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"IS TRANSFORMED INTO A DYNAMIC, INTERACTIVE LEARNING ENVIRONMENT" (FLIPPED LEARNING NETWORK (FLN)). (2014) THE FOUR PILLARS OF F-L-I-P). THIS IS OFTEN DONE WITH DIRECT INSTRUCTION VIDEOS BEING ASSIGNED AS HOMEWORK AND HANDS-ON ACTIVITIES/PRACTICE TAKING PLACE IN THE CLASSROOM (EDUCATIONAL TECHNOLOGY RESEARCH & DEVELOPMENT, 2013). THIS CONCEPT ALLOWS FOR MORE ACTIVE LEARNING TO TAKE PLACE BUT RELIES HEAVILY ON TECHNOLOGY. IN ORDER TO FULLY IMPLEMENT THIS CONCEPT, ACCESS TO WORKING TECHNOLOGY MUST BE AVAILABLE DAILY. BECAUSE OF OUR STUDENT DEMOGRAPHIC, MANY DO NOT HAVE ACCESS TO EITHER THE INTERNET OR THE TECHNOLOGY AT HOME SO WE (MS. HOPPER AND MS. WOLFE) HAVE HAD TO IMPLEMENT MORE OF A BLENDED LEARNING ENVIRONMENT WHERE THE TECHNOLOGY COMPONENT IS ALSO DONE IN CLASS. HOWEVER, WITH THE LIMITED ACCESS CURRENTLY AT WILSON, THIS IS A CONSTANT STRUGGLE.

WITH THE ADDITION OF A CHROMEBOOK CART THESE 9TH GRADE SCIENCE TEACHERS WILL HAVE THE DAILY ACCESS THEY NEED. NO LONGER, WILL IT BE THE AFFLUENT STUDENTS (USUALLY IB; IN THE CASE OF WILSON HIGH SCHOOL) WHO WILL KNOW AND UNDERSTAND HOW TO USE TECHNOLOGY TO INCREASE THEIR KNOWLEDGE. CHROMEBOOKS ARE WEB-BASED AND THE PROGRAMS SUCH AS GOOGLE APPS FOR EDUCATION, TEACHERTUBE, KNOWMIA, JUST TO NAME A FEW, ARE EASILY ACCESSIBLE. IN ADDITION, CHROME EXTENSIONS, SUCH AS READ & WRITE, AND OTHER APPS WORK SMOOTHLY ON A CHROMEBOOK AND CAN ENHANCE THE LEARNING EXPERIENCE FOR THE STUDENTS. WITH THE USE OF CHROMEBOOKS, STUDENTS CAN EVEN WORK AND VIEW THEIR ASSIGNMENTS OFFLINE, WHICH WOULD ALLOW STUDENTS TO CHECK OUT CHROMEBOOKS IF NECESSARY AND TAKE THEM HOME.

OUR OVERALL GOAL IS NOT ONLY TO INCREASE THE ACCESS TO TECHNOLOGY WITHIN THE SCIENCE CLASSES THAT HAVE BEEN FLIPPED AT WILSON, BUT TO ALSO INCREASE THE READING, WRITING, AND RESEARCH SKILLS OF THE

Name of the organization

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APPROXIMATELY 300 FRESHMAN AT WILSON HIGH SCHOOL. SCIENCE IS NATURALLY
 A TOPIC THAT REQUIRES RESEARCH. STUDENTS NEED TO BE ABLE TO RESEARCH
 TOPICS TO PERFORM EXPERIMENTS. THEY NEED TO BE ABLE TO WRITE
 SCIENTIFICALLY. STUDENTS NEED TO BE ABLE TO UNDERSTAND THE INFORMATION
 THEY READ. CHROMEBOOKS WILL HELP ACCOMPLISH THIS GOAL AND PRODUCE MORE
 LITERATE STUDENTS.

SMART TABLE FOR SMART KIDS - \$5,321.36

KELSEY MCGINTY - SOUTHSIDE MIDDLE SCHOOL

THE PURPOSE OF THIS GRANT IS TO PROVIDE STUDENTS WITH
 ORTHOPEDIC AND INTELLECTUAL DISABILITIES THE OPPORTUNITY TO ENGAGE IN
 COLLABORATIVE LEARNING THROUGH THE USE OF TECHNOLOGY. CURRENTLY,
 STUDENTS ARE ABLE TO ACCESS CURRICULUM THROUGH THE USE OF IPADS AND USE
 TECHNOLOGY FOR INDIVIDUAL L

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
 WITH MANIPULATIVES AND OTHER STANDARDS-BASED MATERIALS WITH THE FUNDS
 PROVIDED. THE MATERIALS ARE EVEN PARENT-FRIENDLY! PARENTS WILL TAKE ON
 AN ACTIVE ROLE BY MONITORING THEIR CHILD'S PROGRESS AND SIGNING OFF ON
 SKILLS PRACTICED DAILY/WEEKLY. BOOKBAGS WITH S.W.A.G. IS TAILORED TO
 MEET STUDENTS' INDIVIDUAL NEEDS AND PROVIDES THEM WITH AN OPPORTUNITY
 TO EXCEL TO THEIR FULLEST LEARNING POTENTIAL BY HAVING AN AT HOME,
 HANDS-ON LEARNING EXPERIENCE! FURTHERMORE, STUDENTS WILL TAKE OWNERSHIP
 FOR THEIR LEARNING BY SETTING AN INDIVIDUAL GOAL, AND CONFERENCE WITH
 THE TEACHER TO DISCUSS EXPECTATIONS. STUDENTS WILL THEN BE READY TO
 SELECT THE APPROPRIATE "BOOKBAG WITH S.W.A.G." TO HELP THEM MEET THEIR
 DESIRED LEARNING GOAL!

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AUTHORS AT WORK - \$500

CAROL DENHAM, BELINDA ELMORE - ROYALL ELEMENTARY SCHOOL

IN AN EFFORT TO BETTER UNDERSTAND THE WRITING PROCESS, STUDENTS WILL USE MENTOR TEXTS AS GUIDES TO AUTHOR AND PUBLISH THEIR OWN INDIVIDUAL BOOKS FROM VARYING GENRES INCLUDING MATH, SCIENCE, SOCIAL STUDIES, AND FICTION. THESE WILL BE READ AND SHARED WITH PARENTS, CLASSMATES, PEERS, AND EARLY CHILDHOOD STUDENTS. STUDENTS WILL USE MENTOR TEXTS TO WORK THROUGH THE WRITING PROCESS OF PLANNING AND CREATING A MANUSCRIPT OF THEIR OWN. THEY WILL COME AWAY WITH AN APPRECIATION OF THE EFFORT IT TAKES FOR AUTHORS TO COMPLETE A FINISHED PRODUCT AND A PRIDE OF PRODUCING THEIR VERY OWN BOOK. ROYALL'S READING COACH WILL BE INVOLVED DURING THIS PROJECT TO INTERJECT HER EXPERTISE IN READING AND WRITING AND HELP GUIDE STUDENTS ALONG THE WAY. AS STUDENTS CREATE MANUSCRIPTS AND EDIT, THEY WILL BE HONING THEIR WRITING SKILLS AND PRACTICING STANDARD ENGLISH CONVENTIONS. FINAL PUBLISHED BOOKS WILL BE SHARED WITH CLASSMATES, PARENTS, STAFF MEMBERS, AND YOUNGER STUDENTS AT THE CULMINATING EVENT, AUTHOR'S DAY, IN ROYALL'S LEARNING COMMONS.

READY, SET, READ! - \$483.42

KATHRYN POSTON - LUCY T. DAVIS ELEMENTARY SCHOOL

THE OBJECTIVE OF THIS GRANT IS FOR STUDENTS TO BE ABLE TO READ AND ENJOY CHAPTER BOOKS ON THEIR LEVEL TO CHALLENGE THEIR READING ABILITY SO THEY CAN GROW AND BECOME BETTER READERS. THE IMPACT OF THE PROJECT WILL DIRECTLY AFFECT THE STUDENTS' READING LEVEL, AND ENABLE THEM TO BE ABLE TO READ AND UNDERSTAND MORE COMPLEX TEXTS. IN ADDITION, THESE

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RESOURCES WILL ENABLE MY STUDENTS TO CONTINUE TO BUILD THEIR READING STAMINA. THIS PROJECT WILL NOT ONLY AFFECT STUDENTS' READING ABILITY, BUT WILL ENABLE THEM TO BECOME LIFELONG LEARNERS AND LOVERS OF BOOKS. THIS GRANT WILL FUND 11 SETS OF CHAPTER BOOKS.

MOVE IT! - \$500

DEBORAH CHAPMAN - DELMAE ELEMENTARY SCHOOL

DELMAE HAS WORKED TO BECOME A STEAM SCHOOL OVER THE LAST YEAR. WE RECOGNIZED THE NEED FOR STUDENTS TO LEARN HOW TO THINK ABOUT HOW THINGS MOVE AND DO WORK. THIS GRANT WILL FUND ACTIVITIES THAT WILL DEVELOP THE HABITS OF MIND THAT ARE NECESSARY FOR SCIENTIFIC THINKING, AND ALLOW STUDENTS TO ENGAGE IN SCIENCE IN WAYS THAT ARE SIMILAR TO THOSE USED BY SCIENTISTS AND ENGINEERS. USING THE CROP-A-DILES THAT WILL BE PURCHASED FOR THIS GRANT, MACHINE DESIGN, BUILDING AND MODELING WILL GO MUCH FASTER TO PROMOTE MORE ENGINEERING LESSONS THROUGHOUT THE YEAR.

THE POWER OF STEAM - \$500

REGINA PETERSON - NORTH VISTA ELEMENTARY SCHOOL

INTEGRATING SCIENCE, TECHNOLOGY, ENGINEERING, ART, AND MATH DEMONSTRATES THE EQUAL IMPORTANCE OF THESE SUBJECTS AND HOW WE USE THEM IN THE REAL-WORLD. THE STUDENTS WILL WORK TOGETHER ON EVERY PROJECT AND EACH PROJECT HAS REAL WORLD APPLICATIONS. STUDENTS NEED TO EXPERIENCE THE SUCCESS AND FAILURE OF DESIGN CHALLENGES IN A SAFE ENVIRONMENT. WE TEACH THAT IT'S OKAY TO GET UNEXPECTED RESPONSES WHEN DESIGNING A POSSIBLE SOLUTION BECAUSE WE CAN LEARN FROM ERROR AND USE IT TO MAKE THE PROJECT BETTER. THIS GRANT WILL FUND SUPPLIES TO BUILD

Name of the organization

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MODELS. ONE EXAMPLE OF A MODEL IS SPAGHETTI TOWERS WHICH IS BASED ON THE FACT THAT AS MORE AND MORE PEOPLE POPULATE THE PLANET, LARGE CITIES MUST FIGURE OUT WAYS TO SAFELY BUILD TALL STRUCTURES TO MEET THE NEEDS OF GROWING POPULATIONS. STUDENTS WILL BUILD THE TALLEST TOWER POSSIBLE USING ONLY RAW SPAGHETTI NOODLES AND MARSHMALLOWS. THEY WILL THINK ABOUT THE DESIGN AND DISCOVER WHICH MODELS WERE MOST SUCCESSFUL. THESE FUNDS WILL ALLOW FOR SEVEN ADDITIONAL STEAM RELATED MODELS COVERING A WIDE VARIETY OF TOPICS.

FORM 990, PART VI, SECTION B, LINE 11:

THE RETURN WAS PREPARED BY AN INDEPENDENT ACCOUNTANT WITH THE ASSISTANCE AND OVERSIGHT BY MANAGEMENT. MANAGEMENT PRESENTED THE PREPARED FORM 990 TO THE FINANCE COMMITTEE OF THE BOARD OF DIRECTORS FOR FIRST-LEVEL APPROVAL. FOLLOWING THAT, THE FINANCE COMMITTEE PRESENTED THE PREPARED FORM 990 TO THE FULL BOARD AT THE FIRST SCHEDULED BOARD MEETING AFTER ITS COMPLETION AND PRIOR TO FILING THE FORM WITH THE IRS. DISCUSSION OF THE FORM 990 WITH THE FULL BOARD WAS RECORDED IN THE MINUTES OF THE MEETING. QUESTIONS AND CONCERNS WERE ADDRESSED BY MANAGEMENT AND THE FINANCE COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15A:

EVERY THREE YEARS (OR MORE FREQUENTLY IF NECESSARY), THE COMPENSATION FOR EACH SCHOOL FOUNDATION POSITION AND EMPLOYEE WILL BE REVIEWED BY THE BOARD OF DIRECTORS AND/OR SUPERVISOR. THE COMPENSATION REVIEW IS BASED ON A VARIETY OF FACTORS, INCLUDING, BUT NOT LIMITED TO THE EDUCATION, EXPERIENCE, QUALIFICATIONS AND PRIOR PERFORMANCE OF THE EMPLOYEE; THE EXPERTISE REQUIRED FOR THE POSITION; THE COMPENSATION PAID TO SIMILAR-QUALIFIED PERSONS IN FUNCTIONALLY-COMPARABLE POSITIONS; AND THE COMPENSATION OFFERED BY ORGANIZATIONS SIMILAR TO THE SCHOOL FOUNDATION.

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COMPARIABLE SALARY INFORAMTION IS OBTAINED FROM COMPENSATION STUDIES
 CONDUCTED BY EMPLOYER AND HUMAN RESOURCES ORGANIZATIONS AS WELL AS OTHER
 SCHOOL FOUNDATIONS.

FORM 990, PART VI, SECTION C, LINE 19:
 THE SCHOOL FOUNDATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC ON ITS
 WEBSITE AND BY EMAILING IT TO THE SPECIFIC REQUESTS, AS WELL AS PHOTOCOPIES
 OF RECENT FILINGS OF THE FORM 990 ARE AVAILABLE UPON REQUEST AT THE
 ADMINSTRATIVE OFFICE OF THE ORGANIZATION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
 ROUNDING 1.

FORM 990, PART XII, LINE 2C:
 THE AUDIT COMMITTEE DID NOT CHANGE ITS OVERSIGHT OR SELECTION PROCESS
 DURING THE YEAR.