990 Form

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 2015 Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection ◆ Information about Form 990 and its instructions is at www.irs.gov/form990. For the 2015 calendar year, or tax year beginning 07/01/15, and ending 06/30/16 D Employer identification number C Name of organization Check if applicable: Aurora Public Schools Foundation Address change Aurora Public Schools Education Fdn 74-2477363 Doing business as Name change Number and street (or P.O. box if mail is not delivered to street address? 303-326-2042 15701 E. 1st Avenue, Suite 206 Initial return City or town, state or province, country, and ZIP or foreign postal code Final return/ terminated CO 80011 851.391 Aurora G Gross receipts\$ Amended return Name and address of principal officer: Yes X No H(a) is this a group return for subordinates Application pending Jay Grimm Yes 15701 E. 1st Avenue, Suite 206 If "No." attach a list. (see instructions) CO 80011 Aurora 4947(a)(1) or **X** 501(c)(3) (insert no.) 527 501(c) Tax-exempt status: H(c) Group exemption number ◆ www.educateaurora.org Year of formation: 1987 M State of legal domicile: CO Form of organization: X Corporation Trust Association Summary 1 Briefly describe the organization's mission or most significant activities: Cultivate community investment to enrich student opportunity Governance 2 Check this box 🌓 if the organization discontinued its operations or disposed of more than 25% of its net assets. 20 3 Number of voting members of the governing body (Part VI, line 1a) 3 ٥ă 20 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 0 5 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 25 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b Current Year Client Copy 753,599 413,164 8 Contributions and grants (Part VIII, line 1h) Revenue 0 9 Program service revenue (Part VIII, line 2g) 992 967 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -23,605 30,738 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 390,526 785,329 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 545,424 337,751 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 14 Benefits paid to or for members (Part IX, column (A), line 4) ٥ 0 88,719 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 98,101 0 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) ◆ 5,661 24,846 75,437 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 501,907 668,371 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 -277,845 283,422 Beginning of Current Year End of Year გ გ 901,906 1,200,660 20 Total assets (Part X, line 16) 55,763 21 Total liabilities (Part X, line 26) 71,095 846,143 1,129,565 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Sign Executive Director Here Jay Grimm Type or print name and title Preparer's signature Print/Type preparer's name Check Paid 11/30/16 self-employed P00937216 Wendy S. Campbell, CPA Campbell, CPA Preparer Arrow Partnership, LLC Firm's EIN 66 14-1908292 Firm's name **Use Only** 8055 E Tufts Ave Ste 240 Denver, CO 80237-2854 303-321-8500 Firm's address Yes X No May the IRS discuss this return with the preparer shown above? (see instructions)

Form 990 (2015) Aurora Public	Schools Foundation	n 74-2477363	Page 2
Part III Statement of Program	n Service Accomplishments		न
		any line in this Part III	X
1 Briefly describe the organization's miss Cultivate community	sion:	ah studant appartus	i +
Cuicivate Community	Investment to entr	ch student opportun	± <u>y</u>
2 Did the organization undertake any sign	nificant program services during the ye	ar which were not listed on the	
prior Form 990 or 990-EZ?			Yes X No
If "Yes," describe these new services of			
3 Did the organization cease conducting,			Yes X No
services? If "Yes," describe these changes on So	rhedule O		[] Tes [25] NO
4 Describe the organization's program se		three largest program services, as mea	sured by
expenses. Section 501(c)(3) and 501(c	(4) organizations are required to repo	rt the amount of grants and allocations	to others,
the total expenses, and revenue, if any		-	
4a (Code:) (Expenses \$ The Aurora Public Sc	398,678 including grants of	of \$ 337,751) (Reven	ue \$
The Aurora Public Sc	chools Foundation (APSF) cultivates co	mmunity
investments for Auro	ra Public Schools p	projects that drive	innovation and
excellence for more	than 39,000 student	ts, 5,000 teachers a	and staff in 59
schools. APSF builds	long-lasting part	nerships by bringin	g together
teachers and staff,	business people, pa	arents, alumni and	the broader
community.			
APSF serves a divers	se student population	on consisting of:	
- students seming fr	om 131 different c	ountries	
- students coming in	133 different land	uages	
Beddenes speaking			
4b (Code:) (Expenses \$	including grants of	of\$) (Reven	ue \$
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			.,
*			
•			
4c (Code:) (Expenses \$	including grants o	of\$) (Reven	ue \$
•			
•			
4d Other program services (Describe in S			
(Expenses \$	including grants of \$) (Revenue \$)
4e Total program service expenses ◆	398,678		

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Part IV Checklist of Required Schedules

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F	In 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)? If "Yes,"			
	complete Schedule A	. 1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	3		x
	candidates for public office? If "Yes," complete Schedule C, Part I	.		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,	`		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	_		х
	Part III	. 5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	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? If "Yes," complete Schedule D, Part II	7		X
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	•		
8	L. Oberland D. Derf III	8		х
	complete Schedule D, Part III	. "		
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			v
	debt negotiation services? If "Yes," complete Schedule D, Part IV	. 9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		37	l
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	. 10	X	1000000
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.			
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
а	annulate Ochadula D. Dart VII	11a		X
	complete Schedule D, Part VI Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	. '''		
D		11b		x
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	. 110		
С		11c		X
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	116		
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	44.4		v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		A
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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	. 12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If			
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	.		ت
17	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
40	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	. ''		
18	The state of the s	18	Х	
44	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	10		
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		•
	If "Yes," complete Schedule G, Part III	. 19		X) (2015

Form 990 (2015) Aurora Public Schools Foundation

Part IV Checklist of Required Schedules (continued) 74-2477363

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	Di III	20a	Yes	N
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1
		200		\vdash
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	21	x	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		\vdash
	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22	х	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	<u> </u>	-
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		L
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		L
)	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		L
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
t	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		L
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			Ī
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			T
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			t
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
		26		
	disqualified persons? If "Yes," complete Schedule L, Part II	20		t
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			l
	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	27	sasswate	+
	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):		William I	l
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		╀
)	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			l
	Schedule L, Part IV	28b		L
;	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			١
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		
	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		I
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			T
	conservation contributions? If "Yes," complete Schedule M	30		
	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			T
	Part I	31		
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	1		t
		32		l
	complete Schedule N, Part II	32		t
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			١
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	<u> </u>	+
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
	or IV, and Part V, line 1	34		+
3	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
•	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	<u> </u>	1
	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36	L	
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			T
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
		37		
	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	-		T
		1	I	1

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	rt V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Par	<u>t V</u>				Ш.
			•	20000	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0	4		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	<u> </u>	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			NAME OF THE PARTY		X
	reportable gaming (gambling) winnings to prize winners?			1c		Y
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	2a	0			
	Statements, filed for the calendar year ending with or within the year covered by this return			2b	10000000	*********
b	If at least one is reported on line 2a, did the organization file all required federal employment tax ref Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction	ne)		- 25		
0-	and the second s			3a	***************************************	х
3a	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedul			3b		
b 4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	er auth	ority			
40	over, a financial account in a foreign country (such as a bank account, securities account, or other	financ	ial			
	account)?			4a		X
b	If "Yes." enter the name of the foreign country: ◆					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financia	al Acco	ounts			
	(FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans-	action	?	5b		Х
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did	the				х
	organization solicit any contributions that were not tax deductible as charitable contributions?	 tiono .		6a		Α.
b	If "Yes," did the organization include with every solicitation an express statement that such contribu	ILIONS (וע	6b		
	gifts were not tax deductible? Organizations that may receive deductible contributions under section 170(c).					
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	r aoo	ds			
а	and services provided to the payor?			7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	was				
	required to file Form 8282?		· · · · · · · · · · · · · · · · · · ·	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			Y.	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	t contr	act?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con	ntract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file	Form :	8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ	ization	file a Form 1098-C?	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining donor advised funds are to the second fund maintaining donor advised funds.	ained i	by the	8	100000	
_	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966?			9a	1,000,000	a from entitles
a	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	•••••			- 100 miles	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	,				
а	Gross income from members or shareholders	11a		4		
b	Gross income from other sources (Do not net amounts due or paid to other sources					
	against amounts due or received from them.)	11b				W.
12a				12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			13a		
а	Is the organization licensed to issue qualified health plans in more than one state?			100		
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which					1
b	the organization is licensed to issue qualified health plans	13b	1			
С	Enter the amount of reserves on hand	13c				
14a	The state of the s			14a		X
h	If "Vos " has it filed a Form 720 to report these payments? If "No " provide an explanation in Scheo			14b		1

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Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, a			
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See II	nstruc	
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		X
<u>Sec</u>	tion A. Governing Body and Management			- N-
	1.1.20	10000000	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 20			
	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.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 20	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	diameter.		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X	<u> </u>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		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?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	g:		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Co	de.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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?	10b		
11a	COLUMN TO THE CO	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		Х
b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			T
С	1 2 1 O L LL O ha a thin area deep	12c		x
42	Did the organization have a written whistleblower policy?	13	х	
13	Did the organization have a written document retention and destruction policy?	14	X	
14	Did the process for determining compensation of the following persons include a review and approval by			
15				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	150	x	4500000
a	The organization's CEO, Executive Director, or top management official	15a	X	+
b	* ' * ' * ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	15b	A	164605
	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	40-	AND THE REAL PROPERTY.	v
	with a taxable entity during the year?	16a	Visitifia.	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	100000		America
	organization's exempt status with respect to such arrangements?	16b	<u> </u>	
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ◆ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X 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: ◆			
J	ay Grimm 15701 East 1st Avenue, Suite 206			
A	urora CO 80011 303	<u>-32</u>	6-2	042
			. 00	n coar

DAA Form **990** (2015

DAA

Form 990 (201	Aurora	Public	Schools	Foundation	74-24	77363		Page 7		
				s, Trustees, Key		Highest	Compensated	Employees, and		
	Independent Contractors									
	Check if Sch	nedule O cor	ntains a respo	nse or note to an	y line in this	Part VII .		<u>,</u>		
Section A.	Officers, Dire	ctors, Trustee:	s, Key Employe	es, and Highest Cor	npensated Emp	oloyees				
					tl		la la la constitución del la la			

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

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (B) (C) Reportable Reportable Estimated Position Name and Title Average hours per (do not check more than one compensation compensation from amount of related other week box, unless person is both an from organizations compensation officer and a director/trustee) (list any (W-2/1099-MISC) hours for organization from the Highest compensated employee Institutional (W-2/1099-MISC) organization related and related organizations employee organizations below dotted line) trustee (1) Laura English 5.00 0 0 0 0.00 X X Treasurer (2) Richard Levin 5.00 Secretary 0.00 X X 0 0 0 (3) Debi Hunter Holen 5.00 0.00 X 0 0 0 Director (4) Nathan Eckloff 5.00 0 0 0 0.00 X Director (5) Kenneth Boyd 5.00 Vice Chair 0 0 0 0.00 X X (6) Harry King 5.00 0.00 X 0 0 0 Director (7) Robert McGranaghan 5.00 0 0.00 X 0 0 Director (8) Zachary Mugge 5.00 0.00 0 0 0 X Director (9) Laura Noe 5.00 0 0 0.00 0 Director X (10)Murugan Palani 5.00 0 0 0 0.00 X Director (11) Simone Ross 5.00 0 0.00 0 0 Director X

Form 990 (2015)

	990 (2015) Aurora P	ublic Sc	ho	<u>ol</u>	s	Fo	uno	da	tion 74-247		Page 8
Part		s, Directors, Tr	ruste	es,		Enr	ploy	ees	, and Highest Compens	ated Employees (continue	ed) (F)
	(A) Name and title	Name and title Average Position hours per (do not check more than week pox, unless person is bot) (list any officer and a director/trus						an	Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(12)	Mary Spillan										
Chai		0.00	x		x				0	0	0
(13)	Diane DeGiac										
Dire	ector	5.00 0.00	x						0	0	0
(14)	Dave Mittan	F 00									
Dire	ector	5.00	x						0	О	0
(15)	Derek Rushin	g									
Dire	ector	5.00	x						0	o	0
(16)	JulieMarie S	hepherd									
Dire	ector	5.00	x						0	О	0
							ļ				
1b :	Sub-total			<u></u>		L	1	•			
c ·	Total from continuation sh	eets to Part VII			n A			•			
2	Total (add lines 1b and 1c) Total number of individuals (i reportable compensation fror	ncluding but not			the	se l	isted	abo	l ove) who received more th	l an \$100,000 of	L Voc. I No.
	Did the organization list any									nsated	Yes No
4	employee on line 1a? If "Yes For any individual listed on li organization and related orga	ne 1a, is the sur	n of	repo	rtabl	e co	mpe	nsat	tion and other compensation	on from the such	3 X
5	individual Did any person listed on line for services rendered to the	1a receive or a	ccrue Yes	 e coi " co	nper mple	nsati ete S	on fr	 om lule	any unrelated organization J for such person	or individual	5 X
Section	on B. Independent Contrac	ctors									
1	Complete this table for your compensation from the organ	nization. Report of	pens	ens	l ind ation	eper	ndent the c	cor cale	ndar year ending with or v	vithin the organization's tax	year.
	Name ar	(A) nd business address							Descri	(B) otion of services	(C) Compensation
•								-			
2	Total number of independent	contractors (inc	ludir	a hi	ıt no	t lim	ited 1	L to th	nose listed above) who		
	received more than \$100,000									0	Form 990 (2015)

	Check if Schedule				(A)	(B)	(C)	(D)
					Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
1a	Federated campaigns	1a						
	Membership dues	1b						
	Fundraising events	1c		19,140				
d	Related organizations	1d						
	Government grants (contributions)	1e		62,904				
f	All other contributions, gifts, grants, and similar amounts not included above			71 666				
		1f		71,555 3,490				
•	Noncash contributions included in lines 1	la-1t: \$		3,490	753,599			
n	Total. Add lines 1a-1f			Buon Cada	755,599			
22			Г	Busn. Code			MP Control of the Con	
2a b			·····					
C			·····		ww.			
d	***************************************		·····					
e			·····					
f	All other program service rev		·····					
	Total. Add lines 2a-2f		_	♦				
3	Investment income (including	dividen	ds, intere	st,				
	and other similar amounts)				992	992		
4	Income from investment of ta							
5	Royalties			♦				
	(i) Real		(ii) Pe	rsonal				
6a	Gross rents							
b	Less: rental exps.							
C	Rental inc. or (loss)			i i				
d	Net rental income or (loss) Gross amount from (1) Securities		<u> </u>	♦				
, a	sales of assets (i) Securities	3	(ii) C	Other				
	other than inventory							
b	Less: cost or other							
	basis & sales exps							
	Gain or (loss)							
	Net gain or (loss)		<u></u>	····· •				
8a	Gross income from fundraising e	1						
	(not including \$ 19,							
	of contributions reported on line 1	- 1		96,800				
	See Part IV, line 18	a_		66,062				
	Less: direct expenses Net income or (loss) from fur	u droicing			30,738			
	Gross income from gaming activi		events		307730			
Ja	See Part IV, line 19							
h	Less: direct expenses	a _						
	Net income or (loss) from ga	~ _	tivities	•				
	Gross sales of inventory, less		COUITE					AVER STREET
·va	returns and allowances	a						
h	Less: cost of goods sold	"b						
	Net income or (loss) from sal		ventory	•			Desire annual control of the control of the	
	Miscellaneous Revenue			Busn. Code			Village	
11a							538,000,000,000,000,000,000,000,000	
b			·····					
C			├					
d	All other revenue							
	Total. Add lines 11a-11d			•				
				· · · · · · · ·	785,329	992	0	(

Form 990 (2015) Aurora Public Schools Foundation 74-2477363 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 (A) Total expenses (B) Program service expenses (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 296,307 296,307 and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic 41,444 41,444 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, 17,939 23,562 5,623 trustees, and key employees 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 65,157 60,927 4,230 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes 11 Fees for services (non-employees): a Management 26,797 26,797 **b** Legal 25,700 25,700 c Accounting e Professional fundraising services. See Part IV, line 17 f Investment management fees g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 12 Advertising and promotion 13 Office expenses 11,151 11,189 38 14 Information technology 435 435 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 Interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization . 23 Insurance 24 Other expenses. Itemize expenses not covered 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.) Bank and Credit Card Fees 3,315 3,315 2,322 2,322 Future Centers Board Meetings & Develop $2,\overline{037}$ 2,037 Transportation 1,833 1,833 e All other expenses 1,809 1,809 501,907 398,678 97,568 5,661 25 Total functional expenses. Add lines 1 through 24e . 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)......

Га	rt X	Check if Schedule O contains a response or note to any line in this Part X			
		Check it scriedule o contains a response of hote to any line in a line is	(A) Beginning of year		(B) End of year
Т	1	Cook non interest hearing	21,968	1	247,039
1	2	Cash—non-interest bearing Savings and temporary cash investments	776,853	2	787,621
		Pledges and grants receivable, net	99,247	3	166,000
ļ		Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
	•	trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
İ	6	Loans and other receivables from other disqualified persons (as defined under section			
	•	4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
S		organizations (see instructions). Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
As		Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	3,838	9	
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
Ì	15	Other assets. See Part IV, line 11		15	1 000 000
	16	Total assets. Add lines 1 through 15 (must equal line 34)	901,906	16	1,200,660
	17	Accounts payable and accrued expenses	8,478	17	14,146
	18	Grants payable	44 005	18	EC 040
	19	Deferred revenue	44,285	19	56,949
	20	Tax-exempt bond liabilities	2 000	20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	3,000	21	
S	22				
Ilitie		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X		25	
		of Schedule D	55,763	26	71,095
	26	Total liabilities. Add lines 17 through 25	33,703	20	11,000
es		Organizations that follow SFAS 117 (ASC 958), check here ◆X and			
anc E		complete lines 27 through 29, and lines 33 and 34.	156,573	27	205,411
3ak	27	Unrestricted net assets	589,570		824,154
9	28	Temporarily restricted net assets	100,000		100,000
Fu	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and and			
5					
Ş		complete lines 30 through 34.		30	
SSe	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds		32	
Š	32	Total net assets or fund balances	846,143		1,129,565
	33	Total liabilities and net assets/fund balances	901,906		1,200,660

Form **990** (2015)

Form	990 (2015) Aurora Public Schools Foundation 74-2477363			Page	: 12
	rt XI Reconciliation of Net Assets				_
	Check if Schedule O contains a response or note to any line in this Part XI				Ļ
1	Total revenue (must equal Part VIII, column (A), line 12)	1	78	5,3	
2	Total expenses (must equal Part IX, column (A), line 25)	2		1,9	
3	Revenue less expenses. Subtract line 2 from line 1	3		3,4	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	84	<u>6,1</u>	<u>43</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	1,12	9,5	<u>65</u>
Pa	ort XII Financial Statements and Reporting				\Box
	Check if Schedule O contains a response or note to any line in this Part XII			Yes	∐_ No
	Accounting method used to prepare the Form 990:		2a		x
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis				
h	Were the organization's financial statements audited by an independent accountant?		2b	X	
D	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:				
	Separate basis Consolidated basis X Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
Ī	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	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?		3a		<u> </u>
b	If "Yes." did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b	200	(2015

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

◆ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection ♦ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service Name of the organization

Aurora Public Schools Foundation

Employer identification number 74-2477363

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 2 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Amount of monetary (described on lines 1-9 listed in your governing other support (see organization above (see instructions)) document? instructions) instructions) (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2015 Aurora Public Schools Foundation 74-2477363

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

Page 2 (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Caler	ndar 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.")	239,954	1,437,917	975,191	413,164	753,599	3,819,825
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	26,248	26,816	23,884	23,920	27,671	128,539
4 5	Total. Add lines 1 through 3 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)	266,202	1,464,733	999,075	437,084	781,270	3,948,364
6	Public support. Subtract line 5 from line 4.						3,948,364
	tion B. Total Support				· · · · · · · · · · · · · · · · · · ·		
Caler	ndar year (or fiscal year beginning in) ◆	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	266,202	1,464,733	999,075	437,084	781,270	3,948,364
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	78	43	529	967	992	2,609
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						3,950,973
12	Gross receipts from related activities, etc.	c. (see instructions))			12	97,792
13	First five years. If the Form 990 is for the	ne organization's fir	st, second, third,	fourth, or fifth tax y	year as a section	501(c)(3)	_
	organization, check this box and stop he						
Sec	tion C. Computation of Public						
14	Public support percentage for 2015 (line						99.93%
15	Public support percentage from 2014 Sch	nedule A, Part II, lii	ne 14				92.54%
16a	33 1/3% support test—2015. If the orga				is 33 1/3% or mor	e, check this	. .
	box and stop here. The organization qua						▶ <u>X</u>
b	33 1/3% support test—2014. If the orga						. —
	check this box and stop here . The organ						- L
17a	10%-facts-and-circumstances test—2						
	10% or more, and if the organization me						
	Part VI how the organization meets the '						▶ □
	organization 10%-facts-and-circumstances test—2	Odd If the executa	ation did not abou	k a hay an lina 12	160 16h or 170	and line	L
b	15 is 10% or more, and if the organization						
	Explain in Part VI how the organization r						▶ □
10	supported organization Private foundation. If the organization of	did not check a how	on line 13 16a	16h 17a or 17h 4	check this hov and	d see	······ - L
18	_						▶ □
	instructions						F L

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.)

	If the organization fails to	quality under	the tests listed	below, pleas	e complete Pa	art II.)	
	tion A. Public Support			A			
Caler	ndar 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				apart and a second		
	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.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in) ◆	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
10a							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b				~		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop he		rst, second, third,				> [
Sec	tion C. Computation of Public						
 15	Public support percentage for 2015 (line			mn (f))		15	%
16	Public support percentage from 2014 Sch						%
	tion D. Computation of Investm					<u> </u>	
17	Investment income percentage for 2015			13, column (fl)		17	%
18	Investment income percentage from 201					40	%
19a	33 1/3% support tests—2015. If the org			ine 14, and line 15	is more than 33		
,,,,	17 is not more than 33 1/3%, check this b						▶ [
b	33 1/3% support tests—2014. If the org	=					
V	line 18 is not more than 33 1/3%, check t						▶ □
20	Private foundation. If the organization of						

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

- 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.)

,	Yes	No
1		
2 3a		
3b 3c		
4a		
4b		
4c		
5a 5b		
_5c		
7		
8		
9a		
9b		
9c		
10a		
10b	> 000 E	7) 2015

	ule A (Form 990 or 990-EZ) 2015 Aurora Public Schools Foundation 74-24773	<u> 163</u>		Page 5
Par	t IV Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			110
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	*****	
Sect	ion B. Type I Supporting Organizations			
		1600.000	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		
Sect	ion C. Type II Supporting Organizations			1
		0255350	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		Nacytesia.
Sect	the supported organization(s). ion D. All Type III Supporting Organizations			l
	ion 21 th 1) po in corporating origination		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	- Marine No. 1994	
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	VARAGE!		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	MADE WIT	
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	1414,000000000	
Sect	ion E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	L
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ions):		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	structions	s).	
_		1	V	l Na
	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	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				
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	Section Alvel	1011111
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		1

Schedule A (Form 990 or 990-EZ) 2015 Aurora Public Schools Four			363 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting			
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on			, All
other Type III non-functionally integrated supporting organizations must complete Sec	tions A	through E.	T
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	4.411.444.7	
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-integr	ated Typ	e III supporting organizat	ion (see
instructions).		0.100	

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Aurora Public Schools Foundation 74-2477363 Page 7 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required) Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. Distributable amount for 2015 from Section C, line 6 Line 8 amount divided by Line 9 amount (iii) **Excess Distributions** Underdistributions Distributable Section E - Distribution Allocations (see instructions) Pre-2015 Amount for 2015 Distributable amount for 2015 from Section C, line 6 Underdistributions, if any, for years prior to 2015 (reasonable cause required-see instructions) Excess distributions carryover, if any, to 2015: а h 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. 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). Excess distributions carryover to 2016. Add lines 3j Breakdown of line 7: а c Excess from 2013 d Excess from 2014 e Excess from 2015

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (F	orm 990 or 990-EZ)	2015 Auror	a Public	c Schools	Foundati	on 74-2	2477363	Page 8
Part VI	Supplemental III, line 12; Par B, lines 1 and	I Information. t IV, Section A 2; Part IV, Sec	Provide the , lines 1, 2, 3 ction C, line	explanations 3b, 3c, 4b, 4c 1; Part IV, Sec	required by Part , 5a, 6, 9a, 9b, 9 ction D, lines 2 a	t II, line 10; P 9c, 11a, 11b, and 3; Part IV	art II, line 17a or and 11c; Part IV, , Section E, lines d 8; and Part V,	17b; Part Section 1c, 2a, 2b,
	lines 2, 5, and	l 6. Also compl	lete this part	for any addit	ional information	. (See instruc	tions.)	
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Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

OMB No. 1545-0047

2015

Department of the Treasury Internal Revenue Service ♦ 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

Name of the organization Employer identification number 74-2477363 Aurora Public Schools Foundation Organization type (check one): Filers of: Section: Form 990 or 990-EZ **X** 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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 [X] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % 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,

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization
Aurora Public Schools Foundation

Employer identification number 74-2477363

D-4 1	Cantributara (and instructions) Lies durilizate comics of	Dort Lif additional angestic	noodod
Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space is	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Pickens Technical College 500 Airport Blvd. Aurora CO 80011	\$ 26,216	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 2	Denver Bronco Charities 1701 Bryant Street, Suite 770 Denver CO 80204	\$ 21,000	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. 3	William Stuart 8440 Canyon Rim Trail, #1 Englewood CO 80112	\$ 29,300	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Temple Hoyne Buell Fund 1666 S. University Blvd., Suite B Denver CO 80210	s 150,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No	Name, address, and ZIP + 4 The Daniels Fund 101 Monroe Street Denver CO 80206	\$ 35,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Paul Angell Family Foundation 4140 W. Fullteron Avenue Chicago IL 60639	\$ 210,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

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

Employer identification number

Δı	rora Public Schools Foundation		74-2477363
100	Organizations Maintaining Donor Advised I Complete if the organization answered "Yes" of	Funds or Other Similar Funds on Form 990, Part IV, line 6.	or Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	9	
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)	00 444	
4	Aggregate value at end of year	100 540	
5	Did the organization inform all donors and donor advisors in writing		
3	funds are the organization's property, subject to the organization's		Yes X No
	Did the organization inform all grantees, donors, and donor advisors	in writing that grant funds can be used	
6	only for charitable purposes and not for the benefit of the donor or c	donor advisor, or for any other purpose	
			Yes X No
Do	conferring impermissible private benefit? rt II Conservation Easements.		
	Complete if the organization answered "Yes" of		
1	Purpose(s) of conservation easements held by the organization (che		
	Preservation of land for public use (e.g., recreation or education	n) Preservation of a historically im	portant land area
	Protection of natural habitat	Preservation of a certified histo	ric structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified co	nservation contribution in the form of a co	onservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic structure		
	Number of conservation easements included in (c) acquired after 8/		
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released,	extinguished, or terminated by the organ	nization during the
3		,	
4	tax year ◆	t is located ◆	
	Does the organization have a written policy regarding the periodic r		
5	violations, and enforcement of the conservation easements it holds		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling	ng of violations, and enforcing conservation	on easements during the year
0	A	.9	• ,
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations and enforcing conservation ea	sements during the year
7		violations, and officioning conferences	······································
•	◆\$ Does each conservation easement reported on line 2(d) above sat	isfy the requirements of section 170(h)(4)	(B)(i)
8	and section 170(h)(4)(B)(ii)?		
_	In Part XIII, describe how the organization reports conservation eas	coments in its revenue and evnense state	
9	balance sheet, and include, if applicable, the text of the footnote to	the organization's financial statements th	at describes the
	organization's accounting for conservation easements.	THE Organization of mariotal statements as	at 4555507 15
- D	art III Organizations Maintaining Collections of A	Art Historical Treasures, or Ot	her 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	3), not to report in its revenue statement a	and balance sheet
	works of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in f	furtherance of
	public service, provide, in Part XIII, the text of the footnote to its fin	nancial statements that describes these ite	ems.
b	If the organization elected, as permitted under SFAS 116 (ASC 958	8), to report in its revenue statement and	balance sheet
-	works of art, historical treasures, or other similar assets held for pu	ublic exhibition, education, or research in f	furtherance of
	public service, provide the following amounts relating to these item		
	(i) Revenue included on Form 990, Part VIII, line 1		♦ \$
	(ii) Assets included in Form 990, Part X		
9	If the organization received or held works of art, historical treasures	s. or other similar assets for financial gain	
2	following amounts required to be reported under SFAS 116 (ASC §		•
_			 \$
a	Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X		* \$
<u></u> _	ASSELS INCIDIENT IN FORM 350, FAIL A		Cahadula D (Form 000) 201

Sche	dule D (Form 990) 2015 Aurora F	Public School	ols Foundat	10n /4-	2477363	Page 2
	rt III Organizations Maintaini					sets (continued)
3	Using the organization's acquisition, acces collection items (check all that apply):	sion, and other records	s, check any of the fo	ollowing that are a s	ignificant use of its	
а	Public exhibition	d∏L	oan or exchange pro	grams		
b	Scholarly research	e □ c	Other	-		
c	Preservation for future generations					
	Provide a description of the organization's	collections and explain	n how they further the	e organization's exe	mpt purpose in Part	
•	XIII.	Solicono di la ciripiani		g		
5	During the year, did the organization solici	t or receive donations	of art_historical treas	ures or other simila	ar	
•	assets to be sold to raise funds rather tha					Yes No
Da	rt IV Escrow and Custodial		part of the organization	ATO COMOCIOTE		
	Complete if the organizati		" on Form 990 F	Part IV line 9 o	r reported an ame	ount on Form
	990, Part X, line 21.	on anowered rec	, 0111 01111 000, 1	arriv, mio o, c	n roportou un um	Jane Str Com
12	Is the organization an agent, trustee, custo	odian or other intermed	liany for contributions	or other assets not		
ıu						☐ Yes ☐ No
L	If "Yes," explain the arrangement in Part X	III and complete the fo				
U	ii res, explain the analigement in rait A	un and complete the ic	MOWING LADIC.			Amount
_	Designing belongs				1c	7 31104111
	Beginning balance					
	Additions during the year				· · · · · · · · · · · · · · · · · · ·	
	Distributions during the year				1 40 1	
f	Ending balance					
	Did the organization include an amount or					
	If "Yes," explain the arrangement in Part X	III. Check here if the e	explanation has been	provided on Part XI	<u> </u>	
Pa	rt V Endowment Funds.	1 457	., E 000 I	David IV / 18 40		
	Complete if the organizati					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
	Beginning of year balance	107,943	107,795	107,72	2 107,72	
b	Contributions					6,287
С	Net investment earnings, gains, and					
	losses	130	148	7	3	1 4
d	Grants or scholarships					
	Other expenditures for facilities and					
	programs					
f	Administrative expenses					
	End of year balance	108,072	107,943	107,79	5 107,72	2 107,721
2					· · · · · · · · · · · · · · · · · · ·	<u> </u>
_	Board designated or quasi-endowment ◆		.o (o .g, oo.a (a)	, , , , , , ,		
	Permanent endowment ◆ 93.00 %					
	Temporarily restricted endowment ◆					
G	The percentages on lines 2a, 2b, and 2c s					
20	Are there endowment funds not in the pos		ation that are held an	d administered for t	ha	
Ja	•	session of the organiz	allon that are new an	u auministereu ioi	ile	Yes No
	organization by:					
	(i) unrelated organizations					··
_	(ii) related organizations					
b	If "Yes" on line 3a(ii), are the related organ					3b
4	Describe in Part XIII the intended uses of		owment funds.			
Pa	rt VI Land, Buildings, and E		" = 000 F	5. () () ()	0 5 000	D-4 V - 1' 40
	Complete if the organizati					
	Description of property	(a) Cost or other b			c) Accumulated	(d) Book value
		(investment)	(othe	r)	depreciation	
1a	Land					
b	Buildings					
С	Leasehold improvements					
	Equipment					
	Other					
	I. Add lines 1a through 1e. (Column (d) mu		rt X, column (B), line	10c.)		

The second second second	orm 990) 2015 Aurora Public Schools	Foundation	74-2477363 Page 3
Part VII	Investments—Other Securities.	Farms 000 David N /	line 11h Con Farms 000 Part V Fire 10
••••	Complete if the organization answered "Yes" or		
	(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 Id equity interests		
(A)			
(B)			
(m)			
(E)			
(F)			
(G)			
(H)			
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.) ◆		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes" or	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)			
<u>(9)</u>			
Part IX	n (b) must equal Form 990, Part X, col. (B) line 13.) ◆ Other Assets.		
	Complete if the organization answered "Yes" or	n Form 990, Part IV,	
	(a) Description		(b) Book value
_(1)			
(2)			
(3)			
(4)			
(5)		X-X	
(6)			
(7)			
(8)			
(9)	n (b) must equal Form 000. Port V. col. (P) line 15.)		<u> </u>
Part X	n (b) must equal Form 990, Part X, col. (B) line 15.)		· · · · · · · · · · · · · · · · · · ·
raitA	Complete if the organization answered "Yes" or line 25.	n Form 990, Part IV,	line 11e or 11f. See Form 990, Part X,
1.	(a) Description of liability	(b) Book value	
	income taxes		
(2)			
(3)			1
(4)			1
(5)			
(6)	Alabara		1
(7)			
(8)			1
(9)			1
	n (b) must equal Form 990, Part X, col. (B) line 25.) ◆		
	uncertain tax positions. In Part XIII, provide the text of the for	otnote to the organization	's financial statements that reports the
	liability for uncertain tax positions under FIN 48 (ASC 740). C		

Schedule D (Form 990) 2015 Aurora Public Schools Fo	undation 74-	2477363	Page 4
Part XI Reconciliation of Revenue per Audited Financial	Statements With Rev	enue per Return	
Complete if the organization answered "Yes" on Forn			705 200
1 Total revenue, gains, and other support per audited financial statements		1	785,329
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 0 1		
a Net unrealized gains (losses) on investments			
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)			
e Add lines 2a through 2d		1 1	705 220
3 Subtract line 2e from line 1		3	785,329
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b			
b Other (Describe in Part XIII.)	4b		
c Add lines 4a and 4b		4c 5	705 220
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			785,329
Part XII Reconciliation of Expenses per Audited Financia Complete if the organization answered "Yes" on Forr	n 990. Part IV. line 12	tpenses per ketu a.	rn.
1 Total expenses and losses per audited financial statements			501,907
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
a Donated services and use of facilities	2a		
b Prior year adjustments			
c Other losses			
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1			501,907
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line			501,907
Part XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part V, Line 4 - Intended Uses for Endother The Foundation's endowment consists of	o provide any additional info owment Funds	rmation.	
in 1995. The bequest agreement states foundation is not to exceed the annual amount of \$100,000 is to remain intact	interest earr		
Additionally, the bequest agreement spe		he contribu	tions to t
fund in excess of \$100,000 are to be u			
thus temporarily restricted. The earn	ings on the pa	rincipal amo	unt are to
be used to help women who have overcome			
determined to change their direction as			
course of education or training that w	itt enable the	em to be se.	r-rellant.

Schedule D (F	Form 990) 2015 Supplement	Aurora Pural Information	ublic School n (continued)	s Foundation	74-2477363	Page 5
, , , , , , , , , , , , , , , , , , , ,						
Part X	c - FIN 4	8 Footnot	e			
Manage	ment has	evaluate	d their inc	ome tax posit	cions under the	guidance
includ	led in AS	С 740. В	ased on the	ir review, ma	anagement has no	t identified
any ma	aterial u	ncertain	tax position	ns to be reco	rded or disclose	ed in the
financ	ial stat	ements.				
, ,						
		. , ,				
. , , , , ,						

SCHEDULE G (Form 990 or 990-EZ

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.

IV, lines 17, 18, or 19, or if the 990-EZ, line 6a.

Department of the Treasury
Internal Revenue Service

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.

Inspection

OMB No. 1545-0047

Employer identification number Name of the organization Aurora Public Schools Foundation 74-2477363 **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. Part I 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. e Solicitation of non-government grants Mail solicitations Internet and email solicitations Solicitation of government grants Phone solicitations Special fundraising events In-person solicitations 2a 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? 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. (iii) Did fund-(v) Amount paid to (vi) Amount paid to raiser have (iv) Gross receipts (or retained by) (i) Name and address of individual (or retained by) custody or control of (ii) Activity or entity (fundraiser) from activity fundraiser listed in organization contributions? col. (i) Yes No 1 2 3 5 9 10 \triangleright Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from 3 registration or licensing.

Schedule G (Form 990 or 990-EZ) 2015 Aurora Public Schools Foundation 74-2477363 Page 2

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 Gala None (add col. (a) through (event type) (event type) (total number) col. (c)) Revenue 1 Gross receipts 115,940 115,940 19,140 19,140 2 Less: Contributions 3 Gross income (line 1 minus 96,800 96,800 4 Cash prizes 5 Noncash prizes 10,534 10,534 6 Rent/facility costs 15,043 15,043 Expenses 14,988 14,988 7 Food and beverages Direct 8 Entertainment 9,900 9,900 15,597 15,597 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 66,062 11 Net income summary. Subtract line 10 from line 3, column (d) 30,738 Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more Part III than \$15,000 on Form 990-EZ, line 6a. (d) Total gaming (add (b) Pull tabs/instant Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) 1 Gross revenue 2 Cash prizes Expenses 3 Noncash prizes 4 Rent/facility costs 5 Other direct expenses Yes Yes 6 Volunteer labor 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? 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

Sche	edule G (F	orm 990 or 990-EZ)	2015 A 1	urora	Public	Schools	Foundation	74-247	7363		F	Page	3
11	Does the	e organization condu	ct gaming act	ivities with	nonmembers?						Yes		No
12	Is the or	ganization a grantor.	beneficiary or	trustee of	a trust or a me	ember of a partne	ership or other entity					_	
											Yes		No
13		the percentage of g								_			
a									13a			4	%
b									13b				%
14	Enter th	e name and address	of the person		ares the organ	ization's gaming/s	special events books an		.00				
14	records:	e name and address	or the person	who prep	ares the organ	ization s gamingre	special events books an	iu .					
	records.												
	Nama 4												
	name •	·											
	A -lal	•											
	Address	~											
	5 "			- 0-1-1		41i4i							
15a		e organization have									V	П	M-
	revenue	,							1		Yes	Ш	No
b								and the					
		of gaming revenue r			/ ◆ \$		• •						
C	If "Yes,"	enter name and add	dress of the thi	rd party:									
	Name •												
	Address	▼											
16	Gaming	manager informatio	n:										
	Name •												
	Camaina		otion 📤 C										
	Gaming	manager compensa	ation 🗢 5										
	Dagorial	ian of conjugations	idad 🛦										
	Descript	ion of services prov	ideu 🛡						• • •				
	□ Dire	ector/officer	Employe	20	Indepen	ident contractor							
		ector/officer	стирюуе		maepen	dent contractor							
17	Mandata	ory distributions:											
			undor stata la	v to make	charitable dietr	ibutions from the	gaming proceeds to						
а											Yes	П	No
L	Tetan te	e state garning licer	iser		to be diet	ributed to ether e	exempt organizations or		!	ш	163	ш	NO
b			•			_	xempt organizations of						
Da	rt IV	the organization's o					red by Part I, line 2	h columns (ii	has /i	(1)	and	7	_
га	LIV						le. Also provide an						
		instructions).	30, 100, 1	JD, 13C,	10, and 176	, as applicabl	ic. Also provide an	y additional in	oma		(30)	_	
		manuciona).	. 4										_
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SCHEDULE I (Form 990)

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

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

Open to Public 2015

Attach to Form 990.

Jamaica Child Dev Cn **≗** Schools Transitions Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form Inspection (h) Purpose of grant or assistance Employer identification number Support APS X Yes 74-2477363 School 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (e) Amount of non-cash assistance (book, FMM, appraisal, non-cash assistance other) 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? ◆ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 150,000 59,810 86,497 (d) Amount of cash grant Aurora Public Schools Foundation (c) IRC section if applicable 84-6000870 Govt 84-6000870 Govt 84-6000870 Govt General Information on Grants and Assistance (p) EIN Enter total number of other organizations listed in the line 1 table CO 80111 CO 80111 CO 80111 (a) Name and address of organization or government 15701 E. 1st Avenue 15701 E. 1st Avenue 15701 E. 1st Avenue (1) Jt District #28-J (2) Jt District #28-J (3) Jt District #28-J Department of the Treasury Internal Revenue Service Name of the organization Aurora Part II Aurora Aurora Partl **3** 3 9 6 8 9

Schedule I (Form 990) (2015)

Schedule I (Form 990) (2015)

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" Part III can be duplicated if additional space is needed.	to Domestic Individ	ividuals. Complete if the	the organization answ		on Form 990, Part IV, line 22.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1					
2					
8					
4					
9					
9					
7					
Part IV Supplemental Information. Provide the		required in Part I, I	ine 2, Part III, colum	information required in Part I, line 2, Part III, column (b), and any other additional information.	tional information.
Various corporate and individual	:	contribute	donors contribute funds designated to be	nated to be	
passed through to the various organizations within the District, which are	ious organizat	cions within	the Distric	t, which are	
not actively solicited by the Foundation.	the Foundatic	'n.			
					Schedule I (Form 990) (2015)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

◆ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Department of the Treasury Internal Revenue Service Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form99d

Name of the organization	Employer identification number
Aurora Public Schools Foundation	74-2477363
Form 990, Part III, Line 4a - First Accomplishment	
- 36% of students speak english as a second language,	, of which 82% speak
spanish as their primary language	
- 71% of students receive free or reduced lunches	
- 10% of students attend special educational programs	5
APSF has administered hundreds of scholarships to Au	rora Public Schools
students attending colleges and vocational schools na	ationwide since its'
1987 inception.	
Form 990, Part VI, Line 3 - Management Delegated	
Members of the Aurora Public Schools Foundation board	i are
independent of the school board and the school distri	ict. As part of the
foundation's advocacy for high quality public educati	on for all children in
the district, the foundation accepts an in-kind donat	tion of certain
services from the district and pays for a portion of	the services provided
by the district. Those services primarily include pe	ersonnel dedicated to
the foundation as well as office space and other supp	port services. The
executive director and other assigned staff are super	rvised by the
district's superintendent and the superintendent's de	elegates. The
district's superintendent or his delegate attends for	undation board meetings
but is not a voting memeber of the board.	
The foundation is a separate legal entity and the dis	strict is not

financially accountable for the foundation.

The foundation's

AURO7363 Aurora Public Schools Foundation 74-2477363 FYE: 6/30/2016	Federal Statements Page 2
Schedule	Schedule A. Part II, Line 1(e)
Description	Amount
	\$ 62,904
Pickett - Baseball Uniforms	
Banks - Piano Contributions	2,990 16 951
ants	151,668
Pickens Technical College Cash Contribution	26,216
Xcel Energy	
Cash Contribution	6,000
renver bronco charities Cash Contribution	21,000
William Stuart	
Cash Contribution	29,300
rempre noyne buerr fund Cash Contribution	150,000
The Denver Post Community Fund	
Cash Contribution The Daniels Fund	000,43
	35,000
Paul Angell Family Foundation Cash Contribution	210.000
Comcast Cable	
Cash Contribution	6,830
Konald McDonald House Cash Contribution	10,100
Gala Cash Contribution	19,140
Total	\$ 753,599

AURO7363 Aurora Public Schools Foundation

74-2477363 FYE: 6/30/2016

Federal Statements

11/30/2016 8:11 PM

Page 4

Gala

Other Direct Fundraising or Gaming Expenses

Description	Amount
Bank Fees	\$ 212
Consulting	4,750
Decorations	5,042
Printing	218
Prior year expenses paid	5,375
Total	\$ 15,597