Department of the Treasury Internal Revenue Service

# **Short Form**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file
Form 990 (see instructions). All other organizations with gross receipts less than \$200,000
and total assets less than \$500,000 at the end of the year may use this form.

The organization may have to use a copy of this return to satisfy state reporting requirements. The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2011

Open to Public Inspection

Form 990-EZ (2011)

Α	For	the 2011 calendar year, or tax year beginning 9/01 , 2011, and ending 8/31	, 20	12
В	Check	c if applicable: C D Er	mployer Identifi	cation number
X		ss change DUNCANVILLE ISD EDUCATION FOUNDATION 7	75-26784	18
-			elephone numbe	er
-	Initial Termi	return DUNCANVILLE, TX 75137	(972) 70	8-2000
F				
		1) W ()	roup Exemp umber	otion
G	Acco			anization is <b>not</b>
1	Web	required to	attach Sche	edule B (Form
J		exempt status (ck only one) — X 501(c)(3) 501(c) ( ) <(insert no.) 4947(a)(1) or 527 990, 990-E2		
K	Che	ck $\triangleright$ X if the organization is not a section 509(a)(3) supporting organization or a section 527 organization a	and its gros	s receipts are
	norn	nally <b>not</b> more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postca uctions). But if the organization chooses to file a return, be sure to file a complete return.	ard) may be	required (see
				·- · <u>,</u> · ·
_	asse	lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total ets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ	►\$	49,251.
		Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instruc		Part I.)
		Check if the organization used Schedule O to respond to any question in this Part I		
	1	Contributions, gifts, grants, and similar amounts received	1	26,958.
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	
	4	Investment income.	4	13,295.
	5a	Gross amount from sale of assets other than inventory		
	l	Less: cost or other basis and sales expenses. 5b		
	1	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
R	a	Gross income from gaming (attach Schedule G if greater than \$15,000) 6a		
V	b	Gross income from fundraising events (not including \$ 12,246, of contributions		
REVENU		from fundraising events reported on line 1) (attach Schedule G if the sum		
Ē		of such gross income and contributions exceeds \$15,000)		
	C	: Less: direct expenses from gaming and fundraising events		
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and		
	_	6b and subtract line 6c)	6d	-506.
		Gross sales of inventory, less returns and allowances 7a		
		Less: cost of goods sold		
		Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	592.
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8.	9	40,339.
	10	Grants and similar amounts paid (list in Schedule O)	10	20,983.
Ε	11	Benefits paid to or for members	11	
EXPERSES	12	Salaries, other compensation, and employee benefits	12	1 100
E	13	Professional fees and other payments to independent contractors.	13	1,100.
S	14 15	Occupancy, rent, utilities, and maintenance.	14	002
S	16	Printing, publications, postage, and shipping.  Other expenses (describe in Schedule O)	15	803.
	17	Total expenses. Add lines 10 through 16.	16	<u>4,387.</u> 27,273.
$\dashv$	18	Excess or (deficit) for the year (Subtract line 17 from line 9).	18	13,066.
۸			10	13,000.
N S	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	399,836.
N S E S T E T S	20	Other changes in net assets or fund balances (explain in Schedule O)	20	16,748.
s	21		21	429 650

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	n <b>990-EZ</b> (2011)	DUNCANVILLE	ISE	EDUCATION FOUND	DATION			75	-267	78418	Page 2
120	til Balance	Sheets. (see the organization use	he in:	structions for Part II. edule O to respond to any	) Supprison in this Dart II.						
	CHECK II II	ie organization use	u Sun	squie O to respond to any	question in this Part II.	(A) Be	ginning o	f ve	ar I	(B) End of y	oar
22	Cash, savings,	and investments.					399,8				, 650.
23									23	123	, 000.
24									24		
25							399,8	36	. 25	429	,650.
26								0	. 26		0.
27	Net assets or fi	und balances (line	27 of c	column (B) <b>must</b> agree wi	th line 21)		399,8	36	. 27	429	,650.
				vice Accomplishme				(T)	<b>(</b>	Expenses	
What i	is the organization's	trie organization us	sed Sc	hedule O to respond to ar	ny question in this Part	<u> </u>		X	501(c	uired for section c)(3) and 501(c)	า (4)
Desc	ribe the organiz	ation's program ser	rvice a	E SCHEDULE O ccomplishments for each e manner, describe the se ach program title.	of its three largest prog	ram serv	rices, as		organ	nizations and se	ection
meas	sured by expens efited, and other	ses. In a clear and c relevant informatio	concise n for e	e manner, describe the se each program title.	ervices provided, the nu	mber of	persons		for of	(a)(1) trusts; op thers.)	uonai
28	GENERATE .	AND DISTRIBU	JTE E	RESOURCES TO DUN	CANVILLE ISD FO	R PRO	GRAMS				
	AND ACTIV	ITIES WHICH	ENH	ANCE THE EDUCATION	ONAL PROCESS FO	R ALL					
	STUDENTS.										
	(Grants \$	20,983.	) If th	is amount includes foreig	n grants, check here		▶		28a	20	,983.
29											
	70x==+= &		- <del></del> -								
30	(Grants \$		) 11 tr	is amount includes foreign	n grants, check here			Щ	29 a		
30											
	(Grants \$		) If th	is amount includes foreig	n grants check here			П	30 a		
31	Other program	services (describe	in Sch	edule O)	r grants, cheat hera			ш	30 a		
	(Grants \$	,	) If th	is amount includes foreig	n grants, check here		▶	$\Box$	31 a		
32	Total program s	service expenses (a	add lin	es 28a through 31a)				$\overline{}$	32	20	,983.
	t V List of	Officers, Direct	tors,	Trustees, and Key E	Employees. List each o	ne even if I	not compens	ated.	(see th	ne instructions for F	art IV.)
	Check if	the organization us	sed Sc	hedule O to respond to an							
	(a) Name	e and address		(b) Title and average hours per week	(c) Reportable compensa (Form W-2/1099-MISC	) con	(d) Health be tributions to			(e) Estimated an other compens	
				devoted to position	(If not paid, enter -0-	'	benefit plan	s, an	ď		
SEE	SCHEDILE	Q				ue ue	nerreu comp	ensa	LION		
M2 442.4.											
						0.			0.		0.
									İ		
	1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T 1 T										
									1		
											-
									ŀ		
											=
						1					
			_								
BAA	<del></del>			TEEA0812	L 02/14/12					Form <b>990-E</b> 2	(2011)

			E ISD EDUCAT				75-267841	8	P	age 3
20	the instruc	formation (No	te the Schedule A ar	nd pe	ersonal benefit contract statement is used Schedule O to respond to a	requirements in	SEE SCH	IEDU]	LE O	
33					reported to the IRS? If 'Yes,' pro-				Yes	No
33	each activity in	Schedule O,,	iny activity not previo	usiy	reported to the INS: If Tes, pro-	vide a detailed di	escription of	33		X
34	Were any significant a change to the organic	t changes made to the anization's name. Othe	organizing or governing d rwise, explain the change	ocum on Sc	ents? If 'Yes,' attach a conformed copy of the	ne amended documen	ts if they reflect	34		Х
35 a	Did the organiz	ation have unrela	ted business gross in	ncon	ne of \$1,000 or more during the yethers)?	ear from business	s activities	35 a		х
k					)-T for the year? If 'No,' provide ar		Schedule O	35 b		Λ
•	Was the organia	zation a section 5	01(c)(4), 501(c)(5), c	or 50	1(c)(6) organization subject to sec 'Yes,' complete Schedule C, Part	tion 6033(e) noti	CP	35 c		X
	year? If 'Yes,'	complete applicab	le parts of Schedule	N.	rmination, or significant disposition		uring the	36		Х
					as described in the instructions.		0.	37 b		Х
	any such loans	made in a prior y	, or make any loans ear and still outstand art II and enter the to	ding	any officer, director, trustee, or ke at the end of the tax year covered	y employee <b>or</b> w l by this return?.	ere	38 a		Х
	amount involve	d , , , , , , , , , , , , , , ,		i i i i	***********	38b	N/A			
		7) organizations.								
					***************************		N/A			
					acilities		N/A		i i	
	section 4911 ►		0.; section 4912	-	osed on the organization during th	955 ►	0.			
	transaction duri on any of its pri	ng the year or did or Forms 990 or 9	l it engage in an exc 990-EZ? If 'Yes,' con	ess nplet	panization engage in any section 4 benefit transaction in a prior year te Schedule L, Part I	that has not bee	n reported	40 b		Х
	managers or dis	squalified persons	during the year und	der s	unt of tax imposed on organization ections 4912, 4955, and 4958		0.			
	by the organiza	tion		11	unt of tax on line 40c reimbursed		0.			
e	All organization	s. At any time du	ing the tax year, wa	s the	e organization a party to a prohibit	red tax		40 e		Х
42 a	The organization's books are in care of Located at > 71	► JERRY F 0 SOUTH CED		VCĀ	NVILLE TX	and the second s	no. ► (972) +4 ► 75137	708	-200	0
b	At any time duri	ing the calendar y	ear, did the organiza	ation	have an interest in or a signature	or other authori	tv over a		Yes	No
		name of the foreign		acc	count, securities account, or other	financial account	07	42b		X
	ii ros, emor dio	Tiamo of the loreig	r ocumy, 111							
					90-22.1, Report of Foreign Bank and Fin					
		ng the calendar y name of the foreign		ation	maintain an office outside of the	U.S.?		42c		X
										245
					1990-EZ in lieu of <b>Form 1041</b> — Claccrued during the tax year		► 43	en en e		N/A N/A
44 a	Did the organiza of Form 990-EZ	ation maintain any	donor advised fund	s du	ring the year? If 'Yes,' Form 990 n	nust be complete	ed instead	44a	Yes	No X
b	Did the organizatinstead of Form	ation operate one	or more hospital fac	ilities	s during the year? If 'Yes,' Form 9	90 must be com	pleted	44b		X
C	Did the organiza	ation receive any	payments for indoor	tann	ing services during the year?	***********		44 c		X
	Schedule O				o report these payments? If 'No,'			44 d		
45 a	Did the organiza	ation have a contr	olled entity of the org	ganiz	zation within the meaning of section	on 512(b)(13)?		45a		X
b	Did the organization Form 990 and Sched	receive any payment f ule R may need to be	om or engage in any trans ompleted instead of Form	sactio 990-	n with a controlled entity within the meanin	ng of section 512(b)(1	3)? If 'Yes,'	45 b		X
					TEEA0812L 02/14/12		For	m <b>990</b>	-EZ (2	2011)

Form <b>990-</b>	<b>EZ</b> (2011) DU	NCANVILLE ISD ED	UCATION FOUNDAT	'ION	75-26	78418	Page 4
46 Did t	he organization lidates for publi	engage, directly or indire c office? If 'Yes,' complete	ctly, in political campaig Schedule C, Part I	n activities on behalf o	f or in opposition to		res No
Parevi	Section 50	<b>01(c)(3) organization</b> organizations and se d 52, and complete t	s and section 4947	7(a)(1) nonexempt	charitable trusts o	niv. All sect	tion s
	Check if the	organization used Schedu	e O to respond to any o	question in this Part VI.			
		engage in lobbying activit C, Part II				(es, 47	es No
49 a Did t	he organization	a school as described in se make any transfers to an ated organization a section	exempt non-charitable	related organization?		49a	X
50 Com	plete this table ovees) who ead	for the organization's five ch received more than \$10	highest compensated el	mployees (other than of from the organization.)	fficers, directors, trustee	es and key	
		ss of each employee nan \$100,000	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	T	(e) Estimated a other comper	
NONE _				100102.0	dolored compensation		
51 Com	olete this table i	er employees paid over \$1 for the organization's five I the organization. If there is	nighest compensated in	dependent contractors	_ who each received more	e than \$100,00	0 of
		each independent contractor paid		<b>(b)</b> Type	of service	(c) Compens	ation
NONE _							
				- Salari Ann			
52 Did th	ne organization	er independent contractors complete Schedule A? <b>No</b> st attach a completed Sche	te: All section 501(c)(3)	organizations and 494	7(a)(1) nonexempt	. ► X Yes	□No
		e that I have examined this return ation of preparer (other than office				pelief, it is	INO
				The state of the s			
Sign Here	Signature of or  JERRY  Type or print r	FRAZIER	- A		Date TREASURER	<u>,,</u>	
Paid	Print/Type prepare DAN TONN		Preparer's signature	Date	self-employed P	TIN 200002755	
Preparer Use Only	Firm's name ► Firm's address ►	PO BOX 977		& SEAY, PC, CP	Firm's EIN	75-133338	
May the IR	I S discuss this re	DENTON, TX 76202 eturn with the preparer sho		tions	Phone no. (94	0) 387-85 ► X Yes	63 No
	·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Form <b>990-E</b>	

#### 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. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Total

Employer identification number DUNCANVILLE ISD EDUCATION FOUNDATION 75-2678418 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 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.) 5 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An 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 9 investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 that describes the type of supporting organization and complete lines 11e through 11h. 11 Type II Type III - Functionally integrated Type III - Other d By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization?..... 11 g (i) A family member of a person described in (i) above?..... 11 g (ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above?.... 11 g (iii) Provide the following information about the supported organization(s) h (iii) Type of organization (described on lines 1-9 above or IRC section (i) Name of supported (ii) EIN (iv) Is the organization in column (i) listed in (v) Did you notify (vii) Amount of support organization the organization in column (i) of organization in column (i) your governing document? organized in the U.S.? (see instructions)) your support? Yes No Yes No Yes No (B) (C) (D) (E)

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

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

Sec	tion A. Public Support		Marin and the second se				
Cale	endar year (or fiscal year nning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	( <b>d)</b> 2010	<b>(e)</b> 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	38,574.	13,010.	25,548.	32,735.	26,958.	136,825.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge	2,000.	2,000.	2,000.	2,000.	2,000.	10,000.
4	Total. Add lines 1 through 3	40,574.	15,010.	27,548.	34,735.	28,958.	146,825.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						3,879.
6	Public support. Subtract line 5 from line 4						142,946.
Sec	tion B. Total Support						142,540.
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2007	<b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
7	Amounts from line 4	40,574.	15,010.	27,548.	34,735.	28,958.	146,825.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	26,104.	8,104.	5,799.	7,100.	13,925.	61,032.
9	Net income from unrelated business activities, whether or not the business is regularly carried on					20,000	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.). SEE PART IV	83,824.	52,506.	17,164.	4,709.	86.	158,289.
11	Total support. Add lines 7 through 10						366,146.
12	Gross receipts from related activit	ties, etc (see instru	uctions)	(		12	0.
	First five years. If the Form 990 is organization, check this box and	stop here		third, fourth, or fi	fth tax year as a s	ection 501(c)(3)	.,,,,,,,,
_	tion C. Computation of Pul	blic Support P	ercentage				
	Public support percentage for 201						39.04%
	Public support percentage from 20						28.03%
	33-1/3% support test — 2011. If the and stop here. The organization q 33-1/3% support test — 2010. If the and stop here. The organization q	ualifies as a public e organization did	oly supported orga	nization	and line 15 is 33.1	/304 or more, char	w this hav
17 a	10%-facts-and-circumstances test or more, and if the organization meets the 'facts-attention meets the 'facts-attention' meets attention' meets attention meets attenti	neets the 'facts-and	d-circumstances' t	est, check this bo	x and stop here. 8	volain in Part IV h	10W
	10%-facts-and-circumstances test or more, and if the organization morganization meets the 'facts-and-	eets the 'facts-and circumstances' tes	d-circumstances' t st. The organization	est, check this bo on qualifies as a p	x and <b>stop here.</b> Eublicly supported	Explain in Part IV to organization	now the
	Private foundation. If the organiza	ation did not check	a box on line 13,	16a, 16b, 17a, or			
BAA					Sch	edule A (Form 990	or 990-EZ) 2011

### 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.)

Calendar year (or fiscal yr beginning in) 1  1 Giffs, grants, contributions and membership fees received. (Do not include any 'unusual grants.)  2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.  3 Gross receipts from activities that are not an unrelated trade or business under section 513.  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6.  10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add line 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here.  Section C. Computation of Public Supless public support percentage for 2011 (line 8, c. 16, Public support percentage for 2011 (line 8, c. 16, Public support percentage for 2010 Schedi	( <b>b)</b> 2008	(c) 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
and membership fees received. (Do not include any 'unusual grants.')  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.  Gross receipts from activities that are not an unrelated trade or business under section 513.  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  The value of services or facilities furnished by a governmental unit to the organization without charge.  Total. Add lines 1 through 5.  Amounts included on lines 1, 2, and 3 received from disqualified persons.  Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  C Add lines 7a and 7b.  Public support (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal yr beginning in) —  Amounts from line 6.  Da Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  C Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (Add lins 9, 10c, 11, and 12.)  First five years. If the Form 900 is for the organization, check this box and stop here.  Section C. Computation of Public Suplements.					(y) Focal
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.  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal yr beginning in)*  9 Amounts from line 6.  10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add line 9, 10c, 11, and 12.)  14 First five years. If the Form 90 is for the organization, check this box and stop here.  Section C. Computation of Public Sup					
sions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.  3 Gross receipts from activities that are not an unrelated trade or business under section 513.  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here.  Section C. Computation of Public Sup					
that are not an unrelated trade or business under section 513.  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.  5 The value of services or facilities furnished by a governmental unit to the organization without charge.  6 Total. Add lines 1 through 5.  7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add liss 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the orgonalization, check this box and stop here.  Section C. Computation of Public Supi					
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  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.)  Section B. Total Support  Calendar year (or fiscal yr beginning in) ▶  9 Amounts from line 6.  10 a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here.  Section C. Computation of Public Sup.					
facilities furnished by a governmental unit to the organization without charge.  Total. Add lines 1 through 5  Ta Amounts included on lines 1 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b  Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here.  Section C. Computation of Public Sup.					
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the ordorganization, check this box and stop here.  Section C. Computation of Public Sup.					
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.  b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) 9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the ordorganization, check this box and stop here.  Section C. Computation of Public Sup.					
and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.  c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) ► (a) 200  9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add Ins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the ordorganization, check this box and stop here.  Section C. Computation of Public Sup.  15 Public support percentage for 2011 (line 8, co.)					
c Add lines 7a and 7b.  8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in) ▶  9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add Ins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the ordorganization, check this box and stop here.  Section C. Computation of Public Sup.					
8 Public support (Subtract line 7c from line 6.).  Section B. Total Support  Calendar year (or fiscal yr beginning in)  9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add Ins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the orgonization, check this box and stop here  Section C. Computation of Public Sup.					
Section B. Total Support  Calendar year (or fiscal yr beginning in)   9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here  Section C. Computation of Public Sup.					
9 Amounts from line 6  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c Add lines 10a and 10b  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here  Section C. Computation of Public Sup.					-
9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.  b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  c Add lines 10a and 10b.  11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add lins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here. Section C. Computation of Public Sup.	7 <b>(b)</b> 2008	(c) 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	(f) Total
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 IV.).  13 Total support. (Add Ins 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here.  Section C. Computation of Public Sup.  15 Public support percentage for 2011 (line 8, c.)					
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  13 Total support. (Add liss 9, 10c, 11, and 12.)  14 First five years. If the Form 990 is for the organization, check this box and stop here. Section C. Computation of Public Support Public support percentage for 2011 (line 8, c					
<ul> <li>14 First five years. If the Form 990 is for the organization, check this box and stop here.</li> <li>Section C. Computation of Public Support Public Support percentage for 2011 (line 8, c</li> </ul>					
<ul> <li>14 First five years. If the Form 990 is for the orgonization, check this box and stop here.</li> <li>Section C. Computation of Public Support percentage for 2011 (line 8, c</li> </ul>					
Section C. Computation of Public Sup 15 Public support percentage for 2011 (line 8, c	anization's first, secon	nd, third, fourth, or fi	ifth tax year as a	section 501(c)(3)	•
15 Public support percentage for 2011 (line 8, c		**** * * * * * * * * * * * * * * * * *	ELECTIVE AND KALLY VALV	STATE OF LEASING	and the Color
		ne 13. column (fil)		15	ક
THE CAUTE SUDDIE OFFICE INTERESTRATE AT ITS STATES					
Section D. Computation of Investment	In A Part III line 1E		F	16	8
17 Investment income percentage for 2011 (line			/A)	12	0
18 Investment income percentage for 2011 (line	Income Percentag				8
19a 33-1/3% support tests — 2011. If the organization not more than 33-1/3%, check this box and	Income Percenta 10c, column (f) divide				% ne 17
b 33-1/3% support tests — 2010. If the organization 18 is not more than 33-1/3%, check this	Income Percenta 10c, column (f) divided hedule A, Part III, line	IILAUUII UUAIIIIES AS 3	19a and line 16 i	e more than 33.1/3	% and
20 Private foundation. If the organization did no	Income Percenta 10c, column (f) divided hedule A, Part III, line tion did not check the stop here. The organ tion did not check a but	ox on line 14 or line	inc ac a publish a		

Schedule A	(Form 990	or 990-EZ) 2	2011 DU	JNCANVII	LE ISD	EDUC!	ATION	FOUNDAT	'ION	75-2678	418	Page 4
Part IV	Supplem Part II, Iir (See inst	ental Info ne 17a or ructions).	ormation 17b; an	. Comple d Part III,	te this p line 12.	art to p Also c	rovide omplete	the expla e this par	nations ret for any	equired by Fadditional in	Part II, line formation.	10;
									-		A	
						<b>-</b> -						
						<b>-</b>						
	<b>-</b>		- <b>-</b>				· <del></del>					
							· — —					
	· — — — — -											
						. – – – –						
				<b>_</b>								
							_ =				·	

28 J Z		
y a,		

## SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

#### DUNGANVILLE ISD EDUCATION FOUNDATION

75-2678418

PART II, LINE 10 - OTHER INC	COME
------------------------------	------

NATURE AND SOURCE	2011	2010	2009	2008	2007
SPECIAL EVENTS NET INCOM	E				
MISCELLANEOUS	-506. 592.	4,709.	17,164.	52,506.	83,824.
TOTAL	\$ 86.	\$ 4,709.	17,164. \$	52,506. \$	83,824.

#### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2011

\_\_\_\_\_\_

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Name of the organization					Employer identifica	ition number		
DUNCANVILLE ISD EDUCATIO	N FOUNDATI	ON		75-2678418				
Part Fundraising Activities. Comp Form 990-EZ filers are not re	lete if the organ quired to comple	ization an	swered 'Ye	es' to Form 990, Part IV	, line 17.			
1 Indicate whether the organization				wing activities. Check a	all that apply.			
a Mail solicitations			е					
b Internet and email solicitation	S		f	Solicitation of gove				
c Phone solicitations			g g		•			
d In-person solicitations			9	opecial fulldiability	events			
2a Did the organization have a written employees listed in Form 990, Par	n or oral agreen rt VII) or entity in	nent with a	any individo on with pro	ual (including officers, o ofessional fundraising s	lirectors, trustees or key	Yes No		
<b>b</b> If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	dividuals or enti			_				
(i) Name and address of individual	(ii) Activity		fundraiser	(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to		
or entity (fundraiser)		have custod of contr	dy or control ibutions?	from activity	(or retained by) fundraiser listed in column (i)	(or retained by) organization		
		Yes	No					
1								
2			;					
3								
4								
5								
6				1000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
7				1814				
8								
9								
10								
	<u> </u>	1						
Total			· · · · · · · · · · · · · · · · · · ·					
3 List all states in which the organization or licensing.	ation is registere	a or licens	sed to soli	cit contributions or has	been notified it is exem	ot from registration		
	<del>_</del>							
			<del></del> _					

Schedule G (Form	990 or 990-F7) 2011	DUNCANVILLE	TSD	EDUCATION	FOUNDATION

75-2678418 Part II Fundraising Events. Complete if the organization answered 'Yes' to 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. (d) Total events (add column (a) (a) Event #1 (b) Event #2 (c) Other events GOLF TOURNAMEN through column (c) REVENUE (event type) (total number) (event type) 1 Gross receipts..... 19,481. 19,481. 2 Less: Charitable contributions..... 12,246. 12,246. **3** Gross income (line 1 minus line 2)..... 7,235. 7,235. 5 Noncash prizes..... DIRECT 4,136. 6 Rent/facility costs..... 4,136. 7 Food and beverages ...... 3,715. 3,715. EXPENSES 8 Entertainment..... 9 Other direct expenses..... 1,061. 1,061. 8,912. Net income summary. Combine line 3, column (d), and line 10. -1,677. Par III Gaming. Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming REVENUE bingo/progressive bingo (add column (a) through column (c)) D I P E N S E S 4 Rent/facility costs..... 5 Other direct expenses..... Yes Yes Yes 6 Volunteer labor..... No No 7 Direct expense summary. Add lines 2 through 5 in column (d) ..... 8 Net gaming income summary. Combine lines 1, column (d) and line 7..... **9** Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states?.... **b** If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . Yes

**b** If 'Yes,' explain:

Sche		5-2678		Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity form administer charitable gaming?	ed to	Yes	No
13	Indicate the percentage of gaming activity operated in:			
	The organization's facility	13a		%
	• An outside facility			8
14	Enter the name and address of the person who prepares the organization's gaming/special events books and	ecords:	,	
	Name ▶	· · · · · · · · · · · · · · · · · · ·		
	Address •			
15 a	a Does the organization have a contact with a third party from whom the organization receives gaming revenue?.		Yes	No
b	o If 'Yes,' enter the amount of gaming revenue received by the organization > \$ and th	e amoun	t	
	of gaming revenue retained by the third party > \$			
C	If 'Yes,' enter name and address of the third party:			
	Name ►	··· ··· ··		·····
	Address ►			i
16	Gaming manager information:			
	Name ▶			
	Gaming manager compensation ► \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
	Mandatory distributions			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain state gaming license?			No
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or sp organization's own exempt activities during the tax year > \$	ent in the	е	
	Supplemental Information. Complete this part to provide the explanations required columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applications part to provide any additional information (see instructions).	by Pa able. <i>F</i>	art I, line Also com	2b, plete
		***************************************		
				<del></del>

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

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

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization Employer Identification number DUNCANVILLE ISD EDUCATION FOUNDATION 75-2678418 FORM 990-EZ, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE EDUCATION GRANTS FORM 990-EZ, PART V - REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS (A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? (B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT?

2011 SCHEDULE	O - SUPPLEMENTAL INFORMATION	PAGE 2
DUNCA	INVILLE ISD EDUCATION FOUNDATION	75-2678418
FORM 990-EZ, PART I, LINE 8 OTHER REVENUE		
MISCELLANEOUS	TOTAL	\$ 592. \$ 592.
FORM 990-EZ, PART I, LINE 10 GRANTS AND SIMILAR AMOUNTS P.	AID IN EXCESS OF \$5,000	
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	PROGRAM SERVICES DUNCANVILLE ISD 802 S. MAIN DUNCANVILLE, TX 75137	
CASH AMOUNT GIVEN:	DUNCANVILLE, IA /313/	\$ 20,983.
GALA LUNCHEON/BANQUETS MISCELLANEOUS OFFICE EXPENSES	E	1,626. 320. 310. 1,037. 250.
FORM 990-EZ, PART I, LINE 20 OTHER CHANGES IN NET ASSETS O	PR FUND BALANCES	
NET UNREALIZED GAINS AND LOSSE	ES ON INVESTMENTSTOTAL	\$ 16,748. \$ 16,748.
FORM 990-EZ, PART IV LIST OF OFFICERS, DIRECTORS, TR	USTEES, AND KEY EMPLOYEES	, , , t
NAME AND ADDRESS	HEALT BENEFI  TITLE AND COMPEN- AVERAGE HOURS COMPEN- PER WEEK DEVOTED SATION EBP &	TTS & EXPENSE B- ACCOUNT & TO OTHER
DOYCE SMITH 1022 DOVE CREEK DUNCANVILLE, TX 75116	SECRETARY 2 \$ 0. \$	0. \$ 0.

VICE PRESIDENT 2

0. 0.

0.

SHEILA CASEY 1111 STATLER DUNCANVILLE, TX 75116

#### DUNCANVILLE ISD EDUCATION FOUNDATION.

75-2678418

#### FORM 990-EZ, PART IV (CONTINUED) LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	HEALTH BENEFITS & CONTRIB- BUTION TO EBP & DC	EXPENSE ACCOUNT & OTHER ALLOWANCES
CARLA FAHEY 5740 MONA LANE DALLAS, TX 75236	PRESIDENT 3 \$	0.	\$ 0.8	\$ 0.
JERRY FRAZIER 115 W. WHEATLAND RD, STE. B DUNCANVILLE, TX 75116	TREASURER 2	0.	0.	0.
LARRY BRATTON 918 GREEN TERRACE LANE DUNCANVILLE, TX 75137	DIRECTOR 0	0.	0.	0.
AMBER HATLEY 1212 FRENCHMANS DRIVE DESOTO, TX 75115	DIRECTOR 0	0.	0.	0.
DOTTI PENNEBAKER PO BOX 381405 DUNCANVILLE, TX 75138-1405	SECRETARY 2	0.	0.	0.
STEVE MARTIN 300 E. WHEATLAND ROAD DUNCANVILLE, TX 75116	DIRECTOR 0	0.	0.	0.
ROBERT BROWN 203 E. WHEATLAND RD. DUNCANVILLE, TX 75116	DIRECTOR 1	0.	0.	0.
RICK JAYNES 811 SOUTH COCKRELL HILL RD. DUNCANVILLE, TX 75137	DIRECTOR 1	0.	0.	0.
PHIL MCNEELY 802 S. MAIN DUNCANVILLE, TX 75137	DIRECTOR 0	0.	0.	0.
BILL NEILON 549 W. WHEATLAND ROAD DUNCANVILLE, TX 75116	DIRECTOR 0	0.	0.	0.
DALTON LOTT PO BOX 381146 DUNCANVILLE, TX 75138	DIRECTOR 1	0.	0.	0.
MARLIES PEREGORY 411 SOFTWOOD DRIVE DUNCANVILLE, TX 75137	DIRECTOR 0	0.	0.	0.

#### **DUNGANVILLE ISD EDUCATION FOUNDATION**

75-2678418

#### FORM 990-EZ, PART IV (CONTINUED) LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	HEALTH BENEFITS & CONTRIB- BUTION TO EBP & DC	EXPENSE ACCOUNT & OTHER ALLOWANCES
MIKE CHRIETZBERG 1345 GREEN HILLS COURT DUNCANVILLE, TX 75137	DIRECTOR 1	\$ 0.	\$ 0.	
DEL RAMIREZ 7061 HEDGEBROOK DALLAS, TX 75249	DIRECTOR 0	0.	0.	0.
BOBBY TURNER 1202 REDMAN LANE DUNCANVILLE, TX 75137	DIRECTOR 1	0.	0.	0.
STAN SMITH P.O. BOX 380021 DUNCANVILLE, TX 75137	DIRECTOR 0	0.	0.	0.
ROZ WHITE 922 HUNTINGTON DRIVE DUNCANVILLE, TX 75137	DIRECTOR 0	0.	0.	0.
TERRY WEBB 719 N. HORNE DUNCANVILLE, TX 75116	DIRECTOR 1	0.	0.	0.
LANNAI GAINES 443 E. HWY. 67 DUNCANVILLE, TX 75137	DIRECTOR 1	0.	0.	0.
RONALD WHITE 626 WEST WHEATLAND RD DUNCANVILLE, TX 75116	DIRECTOR 1	0.	0.	0.
KEVIN GILBERT 800 N. MAIN STREET DUNCANVILLE, TX 75116	DIRECTOR 1	0.	0.	0.
DAN PICKERING PO BOX 381146 DUNCANVILLE, TX 75138	DIRECTOR 1	0.	0.	0.
MAYOR DAVID GREEN 1102 FAWN RIDGE DUNCANVILLE, TX 75137	DIRECTOR 1	0.	0.	0.
DON POPE 222 E. WHEATLAND RD DUNCANVILLE, TX 75116	DIRECTOR 1	0.	0.	0.

2011

### SCHEDULE O - SUPPLEMENTAL INFORMATION

PA(GE 5

**DUNCANVILLE ISD EDUCATION FOUNDATION** 

75-2878218

FORM 990-EZ, PART IV (CONTINUED) LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED		COMPEN- SATION	CONTRIB- AC	NEFITS & EXPENS NTRIB- ACCOUNT ION TO OTHER		EXPENSE ACCOUNT & OTHER ALLOWANCES	
DR. ALFRED RAY 802 S. MAIN STREET DUNCANVILLE, TX 75137	DIRECTOR 1	\$		0.	\$	0.	\$	0.
	TOTAL	\$		0.	\$	0.	\$	0.

## FEDERAL WORKSHEETS

PAGE 1

**DUNCANVILLE ISD EDUCATION FOUNDATION** 

75-2878418

# EXCESS CONTRIBUTIONS SCHEDULE A, PART II, LINE 5

2007 2008 CASEY, SHEILA & JOHN		2009	2010	2011	TOTAL	2% AMT_	EXCESS
1,600	0	0	0	0	1,600	0	0
CLUB MKTG/D LOTT 6,000	0	0	0	0	6,000	0	0
CMS PARTNERS, LTD.	0	0	0	0	0	0	0
HUNT CONSTR/M LAVOY	0	0	0	0	0	0	0
LOCKHED MARTIN 10,000	0	0	0	0	10,000	7,323	2,677
URBAN NISSAN/S URBAN 8,525	0	0	0	0	8,525	7,323	1,202
26,125	0	0	0	0	26,125	14,646	3,879

<b>001</b>	19
7111	
<b>~</b> U I	1 1

### **FEDERAL WORKSHEETS**

PAGE 1

#### **DUNCANVILLE ISD EDUCATION FOUNDATION**

75-2678418

# EXCESS CONTRIBUTIONS SCHEDULE A, PART II, LINE 5

2007 2008 CASEY, SHEILA & JOHN		2009	2010	2011	TOTAL	2% AMT	EXCESS
1,600	0	0	0	0	1,600	0	0
CLUB MKTG/D LOTT 6,000	0	0	0	0	6,000	0	0
CMS PARTNERS, LTD.	0	0	0	0	0	0	0
HUNT CONSTR/M LAVOY	0	0	0	0	0	0	0
LOCKHED MARTIN 10,000	0 , ,	0	0	0	10,000	7,323	2,677
URBAN NISSAN/S URBAN 8,525	0	0	0	0	8,525	7,323	1,202
26,125	0 =	0	0	0	26,125	14,646	3,879