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#### **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 and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

OMB No 1545-1150

2008

Open to Public **Inspection** 

		f the Treasury nue Service			assets less than nization may hav						ents		Inspection
		2008 calend					July 1		08, and end			e 30	, 20 08
В	Check if a	applicable	Please	C Name of	f organization								lentification number
	Address	change	use IRS label or		uston Eleme	entary P	TA				75	:	1927108
=	Name ch	•	print or		and street (or P			vered to stre	et address f	Room/suite	E Telep	hone	
=	Initial reti Terminati		type. See	3100 Tea	•				1		( 940		369-2900
=	Amended		Specific		own, state or co	ountry, and	J ZIP + 4				F Group		
=		on pending	instruc- tions.	1 '	Texas 7620	-				1	Numb		, <b>&gt;</b>
	Sect	ion 501(c)(3) d	organiz	ations and	4947(a)(1) no	nexemp	t charitable	trusts musi	t attach	G Accou	unting me	thod:	☑ Cash ☐ Accrual
					hedule A (For					Other	(specify)	<b>&gt;</b>	
										H Check	< <b>▶</b>   7	ıf the	organization is not
1 1	Nebsi	te: ► <u>www</u>	.dento	nisa.org\i	houstones						_		chedule B (Form 990,
<u>J</u>	Organi	zation type (c	heck or	nly one) — 🕻	<b>2</b> 501(c) ( <b>3</b>	) ◀ (inser	tno) 🛮 4	947(a)(1)_or	☐ 527	990-E	Z, or 990	-PF).	
K	Check •	►  If the org	janizatio	on is not a s	ection 509(a)(	3) suppor	rting organiza	tion and its	gross receip	ots are nor	nally not	more	than \$25,000. A return is
					oses to file a re								
			·····		rmine gross red							▶ \$	
Pá	art I	Revenue,	Expe	nses, an	d Changes	in Ne	t Assets o	<u>r Fund B</u>	alances (	See the	instruct	ons	
	1	Contribution	ns, gifts	s, grants, a	ınd sımılar am	nounts re	eceived .					1	8104.14
	2	Program se	ervice r	evenue in	cluding gove	emment	fees and co	ontracts .				2	
	3	Membershi	p dues	and asse	essments .							3	
	4	Investment	ıncom	е								4	
- 1	5a	Gross amo	unt fro	m sale of	assets other	than in	ventory .						
- 1	b	Less: cost	or othe	er basis ar	nd sales exp	enses			5b	·			
اه	С	Gain or (loss	s) from	sale of ass	ets other than	n invento	ory (Subtract	line 5b fror	n line 5a) (a	ttach sche	edule).	5c	
Revenue	6				te applicable par				n gaming, cho	eck here 🕨			
8	а				g \$	8104	.14 of con	tributions					
æ		reported or	n line 1	)					6a		144.14		
	b				than fundra	_	•				642.32		
	C	Net income	or (los	ss) from s <sub>l</sub>	pecial events	s and ac	tivities (Sub	tract line (	3b from lin	e 6a) .		6c	29501.80
	7a	Gross sales	s of inv	entory, les	ss returns an	nd allow	ances .		7a	··wa			
- 1	b	Less: cost	-						7b				
	C				ales of inven	itory (Su	ibtract line 7	7b from lin	e 7a) .			7c	
- 1	8	Other rever			0.0.4.5-	C- 7-	0	<del></del> .			)	8_	
-	. 9				2, 3, 4, 5c,			<u> </u>		· · · ·	🏲	9	37605.94
	10				paid (attach	schedu	ıle)					10	** 1 - 1-1-11 · · · · · · · · · · · · · ·
,,	11	Benefits pa										11	
enses	12	Salanes, R	Hertin	Bensatio	and emplo	oyee be	nefits					12	<del></del>
된	13	Professiona	al fees	and other	yments to	ndepe	endent contr	actors .				13	
Expe	14	(Red nbade)	reno.	<b>Dunne</b> s, at	maintenar	nce .					• • •	14	3184.26
	15 16	Other over	iblicatio	ons, posta	and ship	iping . had sch						15 16	31193.48
	17	Total exp	USTAVIA	Add lines	ee attac 10 through 1	6	iedale		*			17	34377.74
7	18										1	18	3228.2
Net Assets					ear (Subtract								<u> </u>
\$	19	ond-of-year	or iun	o balance	s at beginni on prior yea	ng or y	ear (from iir	ie 27, coil	nmu (A)) (u	nust agre	e with	19	12202
#	20	Other chan	aes in	net assets	or fund bala	ances (a	III) attach expla	nation)				20	0
Ž	21	Net assets	or func	balances	at end of ye	ear. Cor	nbine lines	18 through	1 20		. ▶	21	15430.2
Pa	rt II												of Form 990-EZ.
					tructions for						nning of y		(B) End of year
22	Cast	n, savings, a	•			•						02 2	
23		_										ne 2:	<del></del>
24					· · · ·							ne 2	<del></del>
25	_	-							•			02 2	
26	Tota	l liabilities (c	describ	e <b>&gt;</b>					,			ne 20	·- <del>-</del>
27	Net	assets or fu	ınd ba	lances (lin	e 27 of colu	mn (B) r	nust agree	with line 2	(1)		122	_	* †
For					n Act Notice,					Cat No			Form <b>990-EZ</b> (2008)

10/11/ 930-22 (2000)					raye a	
Part III Statement of Program Service Accom					Expenses quired for 501(c)(3)	
What is the organization's primary exempt purpose? To promote the welfare of children and youth						
Describe what was achieved in carrying out the organization	and	(4) organizations 4947(a)(1) trusts;				
describe the services provided, the number of persons be			rogram title.	opti	onal for others.)	
28 Provide new curriculum, lectures, & support mat		on experiences.				
Equipment used to upgrade all classrooms to im						
Benefits of all students by providing unique edu	cational experiences.					
(Grants \$ ) If this amount incli	udes foreign grants, check	here	. ▶ □	28a	1250.31	
29 Purchase accelerated reading tests for library, te	xtbooks, literacy library,	publications for o	classes, tea			
for classroom use, listening center and special a	rea materials. Benefits a	ll students by pro	viding uni	1		
educational experiences.						
	udes foreign grants, check		. ▶ 🗆	29a	14565.92	
30 Provide science fairs, Environmental Program, A			er Educati			
Conferences, Safety Programs, Field Trips, Field						
Benefits of all students by providing unique educ						
	udes foreign grants, check			30a	16461.93	
31 Other program services (attach schedule)						
	udes foreign grants, check			31a		
32 Total program service expenses (add lines 28a th		<u> </u>		32	32278.16	
Part IV List of Officers, Directors, Trustees, and Key	, <del></del>	<del>,</del>				
(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contributio employee benefit		(e) Expense account and	
	devoted to position	enter -0)	deferred comper		other allowances	
Carisa Armey	President / 20 hrs.				_	
3805 Lake Country, Denton, TX 76205		0		0	0	
Kristi Lawler	Vice President / 10 hrs.			_	_	
2208 Lakeside Ct., Denton, TX 76205		0		0	0	
Lori Hewell	Treasurer / 20 hrs.			_	_	
2613 Pinto Dr., Denton, TX 76210		0		0	0	
***************************************						
				i		
<del></del>			***			
				l		
				I		

Pa	rt V Other Information (Note the statement requirements in the instructions for Part VI.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		1
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes,"	36		1
37a	complete applicable parts of Schedule N			
	Did the organization file Form 1120-POL for this year?	37b		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		✓
39	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on line 9	4		l
	Gross receipts, included on line 9, for public use of club facilities	4		l
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I	40b		1
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶			
đ	Enter amount of tax on line 40c reimbursed by the organization ▶			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		<b>✓</b>
41	List the states with which a copy of this return is filed. ▶ none			
42a	The books are in care of ▶ Lori Hewell, Treasurer  Located at ▶ 2613 Pinto Dr, Denton, Texas  ZIP + 4 ▶		6-390 10	)3
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	$\overline{}$	Yes	
	account)?	42b		✓_
	If "Yes," enter the name of the foreign country:	1 1	}	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	l	✓
43	Section 4947(a)(1) nonexempt charatable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. (	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	1		
	Form 990-EZ	44		<u> </u>
45 ——	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		<b>✓</b>
		_		

Page	4

Part VI	Section '501(c)(3) organizations only and complete the tables for lines 50 a		organizations mu	ist answer questi	ons 4	5–49	
<b>46</b> Did	the organization engage in direct or indirect p		es on behalf of or i	n opposition to		Yes	No
	didates for public office? If "Yes," complete S				46		1
<b>47</b> Did	old the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II						<b>✓</b>
	ne organization operating a school as describe		• •		48		<u> </u>
	the organization make any transfers to an exe	-	ted organization?		49a		<b>✓</b>
	'es," was the related organization(s) a section	_			49b		L
	nplete this table for the five highest compensation received more than \$100,000 of compensation		n. If there is none, e	enter "None."			·
(a)	Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	acc	Expens ount an allowan	nd
none					.,,		
Total nun	nber of other employees paid over \$100,000 -						
	nplete this table for the five highest compensationsation from the organization. If there is no		ctors who each rece	eived more than \$1	00,000	of	
	(a) Name and address of each independent contractor p	paid more than \$100,000	<b>(b)</b> Ty	pe of service	(c) Con	pensai	tion
none							
						•	
Total nun	nber of other independent contractors each re	-	<b>▶</b>				
Sign Here	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete Declaration of the Complete Declaration	on of preparer (other than office	er) is based on all inform	nation of which prepare	r has an	y know	ledge
Paid	Type or print name and title  Preparer's	Date	Check if self-	Preparer's Identifying	Number (S	See instri	uctions)
Preparer's	signature		employed •				
Use Only	Firm's name (or yours if self-employed), address, and ZIP + 4		·	Phone no ► ( )			
May the	RS discuss this return with the preparer show	n above? See instruction	ns		☐ Ye	es 🗆 )-EZ	No (2008)

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

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 75 1927108 PTA Texas Congress 2846 Sam Houston Elementary Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 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 5 section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33% % 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% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 🔲 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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 that describes the type of supporting organization and complete lines 11e through 11h. a Type I **b** ☐ Type II c Type III-Functionally integrated d ☐ Type III-Other e 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 it is a Type II, Type III, 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? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? . . . . . . . . 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? . . . 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . Provide the following information about the organizations the organization supports. (i) Name of supported (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization in col (i) listed in your (described on lines 1-9 the organization in organization in col support above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) support? US? No Yes Yes No Yes

Sche	dule A (Form 990 or 990-EZ) 2008						Page 2
Pai	Support Schedule for Org (Complete only if you chec					and 170(b	)(1)(A)(vi)
Sec	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	<b>Total.</b> Add lines 1-3		ļ			ļ	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.		<u> </u>		l	L	
	tion B. Total Support lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
		(4) 2004	(6) 2005	(0) 2000	(4) 2007	(6) 2000	(i) Total
7 8	Amounts from line 4						
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 IV.)						
11	Total support. Add lines 7 through 10 .		i		_		
12	Gross receipts from related activities, etc	. (see instruction	ons)			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re					
Sec	tion C. Computation of Public Su			<del></del>			
14	Public support percentage for 2008 (line					14	<u>%</u>
15	Public support percentage from 2007 Sch						<u>%</u>
16a	33½ % support test—2008. If the organization						
	and stop here. The organization qualifies						
b	33% % support test—2007. If the organization qua						
170							
174	10%-facts-and-circumstances test—20 more, and if the organization meets the "facts-and-circums organization meets the "facts-and-circums"	acts-and-circur	nstances" test,	check this box	and stop here.	Explain in Pa	art IV how the
b 18	10%-facts-and-circumstances test – 2007 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circum inces" test. The	istances" test, o organization qua	heck this box a difies as a public	and <b>stop here</b> . By supported or	Explain in Paganization	rt IV how the

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.)

	(complete only if you encom	od tilo box of	1 11110 0 0. 1 0				
	tion A. Public Support					,	
C	alendar year (or fiscal year beginning in) ▶	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5906	5987	5827	3201	8104	29025
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.	35512	34115	42776	57128	29502	199033
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					2500	
6	Total. Add lines 1-5	41418	40102	48603	60329	37606	228058
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						<del></del>
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000		:				
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)						228058
	tion B. Total Support					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	41418	40102	48603	60329	37606	228058
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	83	93	0	0	0	176
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	83	93	0	0	0	176
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on	-					
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						228234
<b>14</b> First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b>							
<u>Sec</u>	tion C. Computation of Public Sup	oport Percer	ntage				
15 16	Public support percentage for 2008 (lin- Public support percentage from 2007 S					15	99.9 %
	tion D. Computation of Investmen				<del></del>		
17	Investment income percentage for 2008	I (line 10c, col	umn (f) divided	•	olumn (f)) .	17	.001 %
18 10-	Investment income percentage from 20				l	18	.001 %
19a	33½ % support tests – 2008. If the orgal 17 is not more than 33½ %, check this be	ox and stop he	re. The organiz	zation qualifies	as a publicly s	upported orgai	nization 🕨 🗹
	33\% support tests—2007. If the organiline 18 is not more than 33\% %, check this	box and stop	<b>here.</b> The organ	ization qualifies	s as a publicly s	supported organ	nization 🕨 🔲
20	Private foundation, if the organization of	aid not check a	a pox on line 1.	4. 19a. or 19h	check this ho	x and see inctr	ructions 🕨 I I

Schedule A (F	orm 990 or 990-EZ) 2008 Page •	٠
	Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)	_
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### 2008 990 - EZ EIN 75-1927108

Part 1 - Line 1 Contributions, Gifts, and Grants

	,		
Corporate Partners	Albertson's	\$457 22	
. ^	Target	\$582.38	
	Chick Fil A	\$770.33	
	Pizza Inn	\$500 01	
	Chilis	\$663.89	
			\$2,973.83
	Membership		\$1,221.00
	Box Tops		\$2,945.30
Environmental	Grant - KDB		\$340.00
	Advantage Cartri	dge	\$154 40
	misc		\$469.61
		Total	\$8,104.14

2008 990 - EZ EIN 75-1927108

Part 1 - Line 6 Special Events and Activities

	Income	Expense	Profit
Book Fair Fall	\$10,061.49	\$10,253.21	(\$191.72)
Book Fair Spring	\$7,298.86	\$5,173.85	\$2,125 01
Chess Club	\$630.00	\$348.88	\$281.12
Directory	\$1,200.00	\$780.90	\$419.10
Fall Festival	\$11,694.60	\$4,360.01	\$7,334.59
coupon book	\$4,810.00	\$426.06	\$4,383.94
Boosterthon	\$41,015.95	\$19,450.13	\$21,565 82
Ready to Wear	\$9,147.38	\$8,481.70	\$665.68
School Supplies	\$11,037.94	\$17,531.21	(\$6,493.27)
Yearbook Income	\$9,340.00	\$8,887 63	\$452 37
Field Day	\$1,614.40	\$2,481.34	(\$866 94)
Science Fair	\$293.50	\$467.40	(\$173 90)
Totals	\$108,144.12	\$78,642.32	\$29,501.80

2008 990 - EZ EIN 75-1927108

## Part 1 - Line 15 Postage, Printing & Publications

Postage & Printing	198.07
Newsletter	372.6
Weekly Readers & Scholastics	2613.59

Total 3184.26

#### , 2007 990 - EZ EIN 75-1927108

## Part 1 - Line 16 Other Expense

Administrative	\$325 48
Bank Fees	\$110.75
Insurance	\$395.00
Trainings	\$1,639.86
Field Trips	\$7,200.76
Historian	\$139.83
Special Areas	\$1,830 62
Outdoor Classroom	\$1,164.70
Science Supplies	\$787.74
Box Tops	\$165.62
Membership	\$46.90
PTA Council Dues	\$184.26
Homeroom	\$680.31
Hospitality	\$332.66
Volunteer Expense	\$548 25
AR Books Testing	\$2,219 38
AR Store	\$5,574 72
Arts in Education	\$337 50
Environmental	\$409.82
Guided Reading	\$1,180.70
Student spotlight	\$142.42
Safety Patrol	\$87.72
5th grade party	\$250.00
Teacher Appreciation	\$1,003.53
Discretionary:	
5th Grade Team Builder	\$3,514 44
L.Ellis- 4 Scanners	\$320.00
New School Donation-Blanton	\$100.00
New School Donation-Stephens Elm.	\$100.00
New School Donation-Harpool MS	\$100.00
Coulter-Patriotic Board & Binder	\$150.00
CupcakeParty BkFairChange Winner	\$50 51
Eagle Scout Project	\$100 00

\$31,193 48