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'Form 990-EZ

Department of the Treasury

**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)

Sponsonng 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

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

2008

Open to Public Inspection

A	For the 2008 calendar year, or tax year beginning June 1, 2009 , the and ending June 30 , 20 09								
В	Check if a	applicable	Please	C Name of organization			D Emplo	yer ide	ntification number
	Address	-	use IRS label or	Martha Reid Elementa	ry PTA		20		1064824
닏	Name ch	•	print or	Number and street (or P O	box, if mail is not delivere	d to street address) I	Room/suite <b>E</b> Telepl	none nu	ımber
님	Initial retu Terminati		type. See	500 Country Club Dr.,			( 817	` }	299-6960
H	Amended		Specific	City or town, state or coun	trv. and ZIP + 4	. <u> </u>	F Group		
Ħ		on pending	instruc- tions.	Arlington, TX 76002	.,,		Numb		. <b>► 1889</b>
<u>—</u>	•••		<del></del>	·	exempt charitable trus	ts must attach			Cash Accrual
_	Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach     a completed Schedule A (Form 990 or 990-EZ).  G Accounting m Other (specify								E ousil E Accida
	147 - L - :	to: N//	Δ				H Check ► 🗹		
	Websi	.e					_		edule B (Form 990,
_				nly one) – 🗹 501(c) ( 3 ) 🖣	<del></del>		990-EZ, or 990	<del></del>	
K				on is not a section 509(a)(3) ization chooses to file a retu			ots are normally not	nore th	an \$25,000 A return is
_	_			ne 9 to determine gross rece		<del></del>		▶ \$	
P	art I	Revenue	<u>, Expe</u>	nses, and Changes i	n Net Assets or F	und Balances (	See the instruct	ons fo	or Part I.)
	1	Contributio	ns, gifts	s, grants, and similar amo	unts received			1	0.00
	2		_	revenue including govern				2	0.00
	3	_		and assessments .				3	0.00
	4	Investment						4	0.00
	5a	Gross amo	ount fro	m sale of assets other t			0.00		
	b				•	1 1	0.00		
	c	to the state base and states experience						5c	0.00
Revenue	6			vities (complete applicable parts					
<u> </u>	a			ot including \$			CONTICIO P	İ	
ě	-	reported o					1080.00		
-	1 -	•				6b	819.00		
	b	b Less: direct expenses other than fundraising expenses						6c	261.00
							0.00	00	201.00
	7a					· · ·   ·	0.00	ļ	
	b	Less: cost	•						.00
	C			ss) from sales of invento	ory (Subtract line 7b t	rom line 7a) .		7c	0.00
	8	Other reve		dd lines 1, 2, 3, 4, 5c, 6	2 70 and 9			<u>8</u> 9	261.00
_	1 -							10	0.00
	10			r amounts paid (attach s	-				
"	11			or for members				11	0.00
Š	12			mpensation, and employ				12	0.00
Expenses	13	Professional fees and other payments to independent contractors						13	0.00
X	14		-	utilities, and maintenand				14	0.00
ш	15	• • •		ons, postage, and shipp	ing			15	0.00
	16			describe			)	16	0.00
_	17			Add lines 10 through 16				17	35184.00
Net Assets	18		,	for the year (Subtract li	•			18	261.00
SSE	19			id balances at beginning					42002.00
Ž				reported on prior year				19	13922.00
Š	20	Other char	nges in	net assets or fund balar	ices (attach explanat	ion)		20	0.00
_	21			d balances at end of yea				21	14183.00
Ľ	art II	Balance		s. If Total assets on line		2,500,000 or mor		$\overline{}$	
			-	See the instructions for P			(A) Beginning of y		(B) End of year
2				estments			13922.		
23	3 Land	d and buildii	ngs .					23	
24	4 Othe	er assets (de	escribe	<b></b>		)		24	<del></del>
2	5 Tota	al assets .					13922.		<del></del>
20	6 Tota	al liabilities	(describ	pe ▶		)	<u> </u>	26	<del></del>
2				lances (line 27 of colum			13922.	00 27	
Fo	r Privac	y Act and Pa	aperwor	k Reduction Act Notice, s	ee the Instruction for	Form 990.	Cat No. 106421		Form <b>990-EZ</b> (2008)



. 5 555 == (2555)			_		
Part III Statement of Program Service Accom	plishments (See the instr	uctions for Part	III.)		Expenses
What is the organization's primary exempt purpose?	hild Advocacy			(Rec	quired for 501(c)(3) (4) organizations
Describe what was achieved in carrying out the organization	ation's exempt purposes. In	a clear and cond	ise manner	. I and	4947(a)(1) trusts;
describe the services provided, the number of persons be			rogram title	opti	onal for others)
28 To bring into closer relation the home and the so	hool by providing spring	dance		1	
	-			28a	1100.00
<b>29</b>					
				1	
				200	0.00
				290	0.00
30				1	
				1	
(Grants \$ ) If this amount incli	udes foreign grants, check	here	. ▶ 🗇	30a	0.00
(Grants \$ ) If this amount incli	udes foreign grants, check	here	▶ □	31a	
32 Total program service expenses (add lines 28a th			. >	32	1100.00
Part IV List of Officers, Directors, Trustees, and Key	Employees. List each one eve	n if not compensate	d. (See the I	nstructio	ons for Part IV)
(a) Name and address	(b) Title and average hours per week	<ul><li>(c) Compensation (If not paid,</li></ul>	(d) Contribut employee benef		(e) Expense account and
(a) Name and decress	devoted to position	enter -0)	deferred comp		other allowances
Lisa Roner	President, 35 hrs.	_			_
2103 Welch Place, Mansfield, TX 76063		0		0	0
Jennifer Cass	1st VP Membership,	_		_	
16 Mary Lou Ct., Mansfield, TX 76063	20hrs	0		0	0
Kristie Shumate	2nd VP Budget/Finance	•			
5 Tims Ct., Mansfield, TX 76063	15hrs	0		0	0
Kim Rios	3rd VP Fundraising	0		0	o
2552 Elliott Ave., Mansfield, TX 76063	15hrs	U			<u> </u>
Kati Walker	4th VP Volunteers	0		0	o
2300 Savannah, Mansfield, TX 76063  Jadzia Ajemian	40hrs				
2305 Dobree St., Mansfield, TX 76063	5th VP Programs	0	,	0	o
Steve Palmer	15hrs		<u> </u>		
2206 Windcastle Dr., Mansfield, TX 76063	6th VP Communications	0		0	0
Desiree Thomas					
5 Macan Ct., Mansfield, TX 76063	Treasurer 20hrs	0		0	0
Beverly Whitt	Secretary				
2608 Edgefield Tr., Mansfield, TX 76063	20hrs	0		0	0
Leslie Ellis	Parliamentarian				
2116 Kingsley, Mansfield, TX 76063	15hrs	0		0	0
Kelly Matney-Danner	Historian				
2109 Nugent Dr., Mansfield, TX 76063	15hrs	0		0	0
The second section of the sect					
				<del>.</del>	
	·····	<del></del> -	-		
			-		
	<b>i</b>				

Pa	Other Information (Note the statement requirements in the instructions for Part VI.)			<u> </u>
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed	00		
	description of each activity	33		
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		~
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not 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		,
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		~
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		,
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a			
	Did the organization file Form 1120-POL for this year?	37b		~
	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? If "Yes," complete Schedule L, Part II and enter the total amount involved   38b	38a		-
39	Section 501(c)(7) organizations. Enter:	-		1
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities			
	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		-	Ī
	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		<b>"</b>
C	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			1
d	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		v
41	List the states with which a copy of this return is filed. ▶ N/A			
42a	The books are in care of ▶ Martha Reid PTA Telephone no. ▶ (817		9-69	60
	Located at ► 500 Country Club Dr., Arlington, TX ZIP + 4 ►	760	02	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Ves	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		1
	If "Yes," enter the name of the foreign country: ▶			Γ.
	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		~
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		~
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>
	_ <u> </u>	orm 990	)-E7	(2008)

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Par	VI Section 501(c)(3) organizations only. and complete the tables for lines 50 ar	All section 501(c)(3) and 51.	organizatio	ns mu	st answer questi	ons 4	6–49	
46	Did the organization engage in direct or indirect pe	olitical campaign activitie	es on behalf	of or ir	opposition to		Yes	No
	candidates for public office? If "Yes," complete So					46		~
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II						47	<u>                                     </u>	V
15 the digamental operating a solution as described in deciden 17 (b)(1)(1)(1). If 1 (c), destribute desired in						48	<u> </u>	<u> </u>
	19a Did the organization make any transfers to an exempt non-charitable related organization?					49a		-
	If "Yes," was the related organization(s) a section					49b	لــــــا	<u> </u>
	Complete this table for the five highest compensate each received more than \$100,000 of compensation	on from the organization	. If there is i	none, e	nter "None."	emplo	oyees)	) who
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compe	nsation	(d) Contributions to employee benefit plans & deferred compensation	acc	Expens ount an allowan	nd
NON	E							
Total	number of other employees paid over \$100,000 ▶		<del>                                     </del>					sation
	Complete this table for the five highest compensation from the organization. If there is no		tors who ea	ich rece	eived more than \$1	00,000	) of	
	(a) Name and address of each independent contractor p	oaid more than \$100,000		<b>(b)</b> Ty	pe of service	(c) Cor	npensa	tion
NON	E							
		<del> </del>						
	·····	**			İ			
Total	number of other independent contractors each re-	ceiving over \$100,000	. ▶					
	Under penalties of perjury, I declare that I have examin and belief, it is true, correct, and complete Declaration	ned this return, including accom						
Sign Here	Signature of officer	<b>7</b>			Date of the state	<u> </u>	ι	
	Desiree Thomas, Martha Reid PTA Tre	asurer						
	Type or print name and title	In-t-	Ich	eck if	In		C	
Paid Prepa	Preparer's signature	Date	sei		Preparer's Identifying	Number (	See instr	uctions
Use (	Firm S name for yours L			E	in ►			
-	address, and ZiP + 4			F	Phone no ► ( )			
Mav	the IRS discuss this return with the preparer show	n above? See instruction	ns		<i>.</i>	Y	es [	No

## qry\_Financial\_Report

	Martha Reid Elemetary PTA	
	Year End Report	
Ledger Type Description	Ledger Description	Report Amount
Escrow - State & National Dues	Receipts - State & Nat'l Dues	\$991.75
Escrow - State & National Dues	Payments - State & Nat'l Dues	(\$991.75)
Escrow - Sales Tax	Receipts - Sales Tax	\$239.17
Escrow - Sales Tax	Payments - Sales Tax	(\$191.84)
ncome Line 9/33 74	Beginning Balance	\$19,176.06
	AIM Fundraiser - Cookie Dough	\$19,176.00
	Book Fair - Fall	(\$7,972.47
ncome (,,,,, /;	Book Fair - Half Price Event	\$4,018.51
Income	Camival	\$13,333.10
	0	\$1,000.00
ncome	Concessions/PTA Programs	\$58.00
ncome	Corporate Inc Box Tops	\$818.26
ncome ( 4.6	Corporate Inc Double Daves	\$35.09
ncome ( , , , , , , , ,	Corporate Inc Chick-fil-a	\$85.71
ncome Link to	Corporate Inc School Mali	(\$346.49
come City Con	Corporate Inc Tom Thumb	\$148.78
ncome Living	Corporate Inc Texas Slabs	(\$100.00
ncome ( ) ( ) ( ) ( )	Corporate Inc Kroger Proceeds	(\$115.33
ncome Line 5	Dues (500 members, local portion \$2)	\$662.00
ncome Listin	Directory	\$468.00
ncome to its 70	Fun Fridays	\$430.25
ncome Line 75	Holiday Extravaganza	\$6,251.61
Income 1, J 7cc	Spirit Wear	\$3,962.93
Income Line	Spring Fling June 2009	\$1,080.00
	Total Income	\$64,528.03
	And E. A. Street, Co. 11. December 2	((040,007,05)
Expense Luc 7h	AIM Fundraiser - Cookie Dough	(\$12,807.25)
Expense include	Bank Charges	(\$5,00)
Expense	Bonding/Insurance	(\$505.00)
Expense Fine To	Book Fair - Fall Vendor Payment	(\$5,157.01)
Expense	Book Fair - Fall Incidentals	(\$188.43)
xpense <u>Cara To</u>	Book Fair - Half Price Vendor Payment	(\$4,018.51)
Expense Line (-1)	Carnival	(\$3,058,39)
Expense Line (-15)	Carnival - Bounce Houses	(\$1,000.00)
Expense , , , , , , , , , , , , , , , , , , ,	Council Delegate	(\$15.63)
Expense Programme St.	Council Dues	(\$75.00)
Expense	Dino Pals - Reading Buddies	(\$1,503.79)

## qry\_Financial\_Report

<b>E</b> ense	Car 71,	Directory	(\$144.00)
Expense	Ling 71.	Fun Fridays	(\$333.21)
Expense	in the law	Historian	(\$112.10)
Expense	Line 7/1	Holiday Extravaganza	(\$4,435.70)
Expense	Line hi	Hospitality	(\$272.58)
Expense	i i i i i i i i i i i i i i i i i i i	Life Membership	(\$105.00)
Expense	Life 10	Mansfield Education Foundation	(\$500.00)
Expense		Membership	(\$284.27)
Expense	Line 10	New School Donations	(\$300.00)
Expense	1/22 16	Outstanding checks from 2007-2008	\$400.00
Expense	List I.	Precision Business Machine	(\$7,765.00)
Expense		Programs	(\$8,538.19)
Expense	Line 15	PTA Expense - Office Supplies & Admin	(\$293.90)
Expense		PTA Conferences & Training	(\$1,187.24)
Expense	Linite.	Reflections	(\$193.52)
Expense	Lille	Room Representatives	(\$1,373.36)
Expense	-176 (0	Scholarships	(\$500.00)
Expense	Child in 1	Spirit Wear	<b>(\$2,375.75)</b>
Expense	1 (2.17)	Spring Fling June 2009	(\$819.13)
Expense	6-166 14	Storage Unit	(\$615.60)
Expense	L	Student Achievement	(\$1,583.95)
pense	Livit 16	Student Off Campus Learning (Field Trips	(\$8,343.48)
Expense	1	Teacher Appreciation	(\$1,485.67)
Expense	4.112112	Treasurer	(\$25.00)
[		Total Expense	(\$69,520.66)

13,383.43