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# SCANNED NOV 2 9 2010

Form **990-EZ** 

Department of the Treasury Internal Revenue Service

# Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150 2008

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 receipt 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.

Open to Public Inspection

_		2008 calend		_	_		_		_		_	July				, and e	_			1e 3u		, <u> </u>	
В	Check if ap		Please use IRS			) Na	me of	organ	ızatıon	VI	<u> 2001</u> 1	NIA	201	NER	<b>3</b> 55	OF P	סדי	<b>'</b> S		oyer	ident	tification	
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H	Name cha Initial retur	•	print or	r		Nu	mber a	and st	reet (or l	P.O. bo	ox, if m	naul is n	ot deln	vered to	street	address)	Roc	m/surte	E Tele	phone	nun	nber	
H	Terminatio		type. See	- 1:	2	2110	10 Ev	ergn	een Mi	ilis R	oad								( 57	1)		246-	1808
K	Amended		Specific		$\Gamma$	Crt	y or to	wn, s	tate or c	ountry,	, and Z	<u>′</u> IP + 4			•				F Grou	p Exe	emot	ion	
ň	Application		instruc- tions.	۱ [ ۲	L	Lees	sburg	ą, Vir	ginia,	2017	5-679	<del>)</del> 4							2	ber	•	<b>&gt;</b>	3229
=	• Section	on 501(c)(3)	organiz	_	_								able ti	rusts m	ust a	ttach		Acco	unting m	ethoc	l: [	Z Cash	Accrual
			a con	omp	mpl	lete	d Sch	redul	e A (Fo	rm 99	90 or 9	990-E	<b>Z).</b>					Othe	r (specify	<b>)</b>			
		AI A															ŀ	l Chec	:k ▶ 🔽	if th	e or	ganizatıo	n is <b>not</b>
•	Websit	e: ▶ <u>NA</u>															-	•				dule B (F	Form 990,
J	Organiz	ation type (	check o	onty	nly	one one	<u>;) — 🛂</u>	<u> 1 501</u>	(c) (3	) <b>∢</b> (ii	nsert r	no.)	49	947(a)(1)	or	527		990-	EZ, or 99	0-PF)	•		
K	Check ▶	If the org	ganızatı	tion	on i	is no	ot a s	ection	509(a)	(3) sup	pportir	ng org	anızatı	on <b>and</b>	ıts gr	oss rec	eipts	are no	mally no	more	tha	n \$25,00	0. A return is
	not requ	iired, but if th	e organ	nız	ıızat	ation	choo	ses to	o file a r	return,	, be su	ure to f	file a c	omplet	e retu	'n							
L	Add line	s 5b, 6b, and																			_		68,098
P	art I	Revenue	, Expe	en	ens	ses	, and	d Ch	nange	s in	Net /	Asse	ts or	r Func	Bal	ances	s (Se	e the	instruc	tions	s fo	r Part I	.)
	1	Contributio																		1		_	12,038
	2	Program s																		2			0
	3	Membersh								·····								٠, ٠		3		·	0
	4	Investment	•				woo	331110				•	•		•	• • •	• •			4			0
	1 _	Gross amo					o. of	3000	· · te othe	r tha	n inve	onton	, '		٠ ا	5a	•	•					•
	5a															5b			0				
	b	Less: cost Gain or (los															\ /o#	ach col	odulo)	50	.		0
ē	`c	Special events	s) irom	11 5	Sau	ate o	n ass	eis 0	liter tite	411 IIIV	Cabadi	A (Onn	ruati Fanca	inte ob	from	inie Jaj	danie Abad	hom B		1			
Revenue	6	Special events	s and act	CUVI	UVIUE	165 (0	omple	re app	ilicable p	aris oi	Scriedi	11e G). 1	n any a	anount is		parinny,	UICU	licic P					
Š	a	Gross reve	-	•				_							iris I	6a			56,060				
Œ		reported o		•	•	-									١ ١	6b			35,384	→			
	Ь	Less: direc															P	C-\		60			20,676
	С	Net incom															line	ba) .		_	+		20,070
	7a	b Less: cost of goods sold									ļ												
											4			•									
	C	8 Other revenue (describe ▶ 0										70	-		<u> </u>								
											8	+		22 744									
	9									_									· · ·	9	+		32,714 0
	10	Grants and						•	•			•								10			<del></del>
	11	Benefits p	aid to d	or	or f	for	mem	bers												11	_		0
800	12	Salaries, o				•		-		-										12	$\neg$		0
Ë	13	Profession	al fees	es a	an	nd c	other	payr	ments	to inc	nəqət	dent	contr	actors						13	-		0
Expenses	14	Occupanc	y, rent,	t, L	, uti	tilitie	es, ar	nd m	ainten	ance										14			0
ш	15	Printing, p	ublicati	atio	ion	ns, p	oosta	ige, a	and shi	ipping	g									15		-	45.077
	16	Other exp	enses (	SPI	He	asc <sub>1</sub>	be P	Si	tateme	ent 2										16			45,077
_	17																		<u></u> ▶	17			45,077
ţ	18	Excess or																		18	1		(12,363)
Net Assets	19	Net assets	s offici	นิกัด	ŋd .	bą	larjoê	\$ at	begin	ning (	of yea	ar (fro	om lir	ne 27,	colur	nn (A))	) (mı	ıst agr	ee with	1			
¥		end-of-yea	ar figur	ire	é r	repo	orted	on p	orior ye	ear's	retur	n)								19	$\overline{}$		32,068
<u>let</u>	20	Other cha	iges in	in r	ָם. <u>ָר</u>	et a	ssets	or f	und ba	alance	es (at	tach (	expla	nation)	-					20			0
_	21	Net assets	or fun	iņd	∮b;	(Hair	inces	i ati e	and of	year.	Com	ibine i	lines	18 thro	ough	20 .		<u> </u>	<u>▶</u>	21	_		19,705
P	art II	Balance	Sheet	ets.	ts.	. If T	otal	asse	ts on li	ine 25	5, col	umn (	(B) ar	e \$2,50	00,00	0 or m	ore,				ad c		
			(5	(Se	See	e th	e ins	truct	ions fo	or Par	t II.)							(A) B	eginning of		۲,	(B) End	
2	2 Casl	h, savings,	and inv	ıve	ves	stme	ents												32	068			19,705
2	3 Land	d and build	ngs .																		23		0
2		er assets (d	•																		24		0
2		al assets .																	32	068	-		19,705
2	6 Tota	al liabilities	(descri	ribe	ihe	<b>•</b>											1			_	26		0
2	7 Net	assets or	fund b	bal	ala	ance	es (lir	ne 27	of co	lumn	(B) m	nust a	agree	with la	ne 21	) .			32	068	27		19,705

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Form **990-EZ** (2008) [

Cat. No. 106421

For	m 990-EZ	(2008) .						Page 2
_		<u>,,                                  </u>	t of Program Service Accom	inlishments (See the inst	ructions for Part	III V	T	Expenses
Wi	nat is the	e organizatio	n's primary exempt purpose? _ leved in carrying out the organiz ovided, the number of persons be	Fundraising fer Pa ation's exempt purposes. Ir	rent Teacher a clear and conc	Associations manner.	and	quired for 501(c)(3) (4) organizations 4947(a)(1) trusts; onal for others.)
28	Staten							-
	(Grants	\$	) If this amount incl	udes foreign grants, check	here	. ▶ 🗆	28a	45,077
29								
		\$	) If this amount incl	udes foreign grants, check	here	. ▶ □	29a	
30					·			
31	(Grants	\$ \$	) If this amount includes (attach schedule)	udes foreign grants, check	here	. ▶ 🗓	30a	
٠.	(Grants	_	) If this amount incl		here	. ▶ □	31a	
		rogram ser	vice expenses (add lines 28a th	rough 31a)	<u> </u>	▶	32	45,077
Р	art IV		ers, Directors, Trustees, and Key Name and address	Employees. List each one even (b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0)	d. (See the ins	ns to plans &	(e) Expense
	lie Borr		s Road Leesburg VA 20175	President: 5 hours	0	deletted compe	0	Other anowalices
Ca	thy Sch	necter	s Road Leesburg VA 20175	President: 5 hours	0		0	0
Sc	raya Re	eichert	s Road Leesburg VA 20175	Treasurer: 2 hours	0		0	0
	eresa R 100 Eve		s Road Leesburg VA 20175	Secretary: 2 hours				
							_	
						<u> </u>		
						<u> </u>		
							_	
							_	

p,	ne	3

Par	t 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		✓
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		✓
	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	-	.	_
b	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		✓
	Section 501(c)(7) organizations. Enter:	7		
	Initiation fees and capital contributions included on line 9	1 1		
	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 ▶			
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	40ь		<b>√</b>
	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
	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. ▶	<del></del>		
	Localeu at V	) 24 20175-	16-180 8856	18
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority	į	Yes	No.
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	42b	163	<del>\</del>
	account)?	72.0		<u> </u>
	If "Yes," enter the name of the foreign country: ►  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		<u> </u>
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		✓
	F	orm <b>99</b> 0	0-EZ	(2008)

Form 9	990-EZ (2008) · ·		•				1	Page 4
Par	Section 501(c)(3) organizations only and complete the tables for lines 50 a		organiza	ations mus	st answer quest	ions 4		
46	Did the organization engage in direct or indirect	political campaign activitie	s on be	half of or in	opposition to		Yes	No
	candidates for public office? If "Yes," complete S					46	ļ	<b>✓</b>
47	Did the organization engage in lobbying activities	? If "Yes," complete Sch	edule C,	Part II .		47	<del> </del>	1
48	Is the organization operating a school as describ	ed in section 170(b)(1)(A)(	ii)? If "Ye	es," comple	te Schedule E .	48	<u> </u>	<b>_</b>
49a	Did the organization make any transfers to an ex	empt non-charitable relate	ed organ	uzation?		49a	<u> </u>	<b>↓</b> ✓
	If "Yes," was the related organization(s) a section					49b	<u> </u>	
	Complete this table for the five highest compens each received more than \$100,000 of compensation					y empl	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) Co	empensation	(d) Contributions to employee benefit plans & deferred compensation	acc	Expensount a allowa	nd
None	9			0	0			0
			}					
		-						
Total	number of other employees paid over \$100,000 ▶	0						
	Complete this table for the five highest compens compensation from the organization. If there is no	one, enter "None."	tors who	each rece	ived more than \$1	00,000	) of	
	(a) Name and address of each independent contractor	paid more than \$100,000		(b) Tyr	e of service	(c) Cor	npensa	tion
None	e							
			<del></del>					
	•••••							
			1		-			
Total	number of other independent contractors each r	eceiving over \$100,000	▶	·	0			
	Under penalties of perjury, I declare that I have exam and belief, it is true, correct, and complete. Declarat							
Sign	<b>N</b>							
Here	Signature of officer			D	ate			
	Michael Wright, Treasurer Type or print name and title							
Paid	Preparer's signature	Date		Check if self- employed >	Preparer's Identifying	Number (	See inst	ructions)
Prepa Use (				E	IN ► I			
Mav	the IRS discuss this return with the preparer show	wn above? See instruction	ns .		in i		es [	No
			······	- · ·		orm <b>99</b>		

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

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

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

Open to Public Inspection

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

0198827 Sycolin Creek Elementary PTA' 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.) ☐ 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.) 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 section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) An organization that normally receives: (1) more than 331/3 % 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 331/4 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (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 e 🗌 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). f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the a 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? (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . |11g(iii)| Provide the following information about the organizations the organization supports. (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of organization omanization in col (described on lines 1-9 in col (i) listed in your the organization in support governing document? above or IRC section col (i) of your (i) organized in the (see instructions)) support? Yes Yes Yes No Total

Par	Support Schedule for Org (Complete only if you chec					and 170(b)(	1)(A)(vi)
Sec	tion A. Public Support	Red the Box	011 11110 0, 7,	<u> </u>	·/		
	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	Total. Add lines 1-3	<u> </u>					<del> </del>
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>				<u> </u>	<u></u>
	tion B. Total Support	4-1 0004	(L) 000E	(-) 000C	(d) 0007	(-) 0000	T-1-1
Ca	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 .	<u></u>					<u> </u>
12	Gross receipts from related activities, etc	•	•			12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u> </u>				
	tion C. Computation of Public Su					T	
14	Public support percentage for 2008 (line					14	<u> </u>
15	Public support percentage from 2007 Sc					15	<u>%</u>
16a	331/3 % support test — 2008. If the organiand stop here. The organization qualifies				line 14 is 33% 9	% or more, che	eck this box ▶ □
b	33% % support test—2007. If the organization qualities box and stop here. The organization qualities	zation did not	check a box on	line 13 or 16a,			, check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum	acts-and-circui	nstances" test,	check this box	and stop here.	Explain in Par	t IV how the
b	10%-facts-and-circumstances test—2007 more, and if the organization meets the "facts-and-circumstances the "facts-and-circumstances" and the circumstances that it is a second content of the circumstances that it is a second circumstance to the circumstances test—2007 more than the circumstances test—2007 more than the circumstances test—2007 more, and if the circumstances test—2007 more, and circumstan	acts-and-circun	nstances" test, c	heck this box a	and stop here.	Explain in Part	IV how the
18	Private foundation. If the organization did	I not check a bo	x on line 13, 16a	a. 16b. 17a. or 1	7b, check this	box and see ins	structions >

# 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.)

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.")				32,805	12,038	44,843
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				13,851	20,676	44,527
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 6	The value of services or facilities furnished by a governmental unit to the organization without charge				46,556	32,714	89,370
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons				0	0	0
b	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				0	0	0
С	Add lines 7a and 7b				U	U	0
8	Public support (Subtract line 7c from line 6.)						89,370
_	tion B. Total Support	(-) 0004	(h) 0005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	lendar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(6) 2000	46,556	32,715	89,370
9 10a	Amounts from line 6			-		32,113	
b	sources				8		8
	section 511 taxes) from businesses acquired after June 30, 1975				8	0	8
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on				0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12.)						89,378
14	First five years. If the Form 990 is for organization, check this box and stop	here	<u> </u>	nd, third, fourt	·		
Sec	tion C. Computation of Public Su		<del></del> .				
15	Public support percentage for 2008 (lin				(f)	15	<u>%</u>
16	Public support percentage from 2007 S			7g		16	%_
	tion D. Computation of Investmen		<del>-</del>			47	0/
17	Investment income percentage for 200	•	**	•	olumn (f)) .	17 18	<u>%</u> %
18	Investment income percentage from 20						
198	33% % support tests – 2008. If the org 17 is not more than 33% %, check this b	ox and <b>stop h</b>	<b>ere.</b> The organ	ization qualifie:	s as a publicly s	supported orga	anization 🕨 🗆
b	33% % support tests - 2007. If the organ line 18 is not more than 33% %, check this	s box and <b>stop</b>	here. The orga	anization qualifie	es as a publicly	supported orga	ınızatıon 🕨 🛄
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	o, check this bo	x and see ins	tructions 🕨 🗌

Schedule A (F	orm 990 or 990-EZ) 2008			•	•		Page 4
Part IV		ormation. Comple 17b; or Part III, lir	ete this part to ne 12. Provide	o provide the any other ad	explanation red Iditional informa	quired by tion. (see	Part II, line 10; instructions)
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## VIRGINIA CONGRESS OF PARENTS AND TEACHERS ORGANIZATIONS Sycolin Creek Elementary PTA

32-0198827

Statement 1 Form 990-EZ, Part I, Line 6 Net Income (Loss) from Special Events

	Gross Receipts		Less Contributions		Gross Revenue		Less Direct Expenses		_	t Income (Loss)
After School Program	\$	1,540	\$	-	\$	1,540	\$	862	\$	678
Bingo for Books		167		-		167		262		(95)
Fall Festival		1,036		-		1,036		2,492		(1,456)
Holiday Shoppe		3,646		-		3,646		2,355		1,291
Market Day		6,259		-		6,259		7,518		(1,259)
Movie Night		296		-		296		670		(374)
Onginal Works		8,597		-		8,597		5,724		2,873
		11,818		-		11,818		-		11,818
School Supplies		8,266		-		8,266		7,973		293
Spirit Night		1,934		-		1,934		-		1,934
Spirit Wear		6,835		_		6,835		5,796		1,039
Summer Send Off		2,343		-		2,343		1,732		611
Vanety Show						3,323			3,323	
	\$	56,060	\$	<u>-</u>	<u>\$</u>	56,060	\$	35,384	\$	20,676

#### Statement 2 Form 990-EZ, Part I, Line 16 Other Expenses

	40
Bank Charges : Returned Check Fee	18
Insurance	179
Membership Expense . National & State Dues	558
Miscellaneous : Discretionary Funds	200
Miscellaneous . Office Supplies	1,011
Field Trips: 1st Grade	300
Field Trips 2nd Grade	300
Field Trips . 4th - Jamestown	2,500
Field Trips 5th - Hemlock	2,000
Field Trips Kindergarten	300
PTA Allotments 5th Grade Send Off	295
PTA Allotments Agendas	1,078
PTA Allotments · Assemblies	700
PTA Allotrnents Calendar Magnets	599
PTA Allotments DARE (T-Shirts)	713
PTA Allotments . Friday Folders	665
PTA Allotments : Math Superstars	102
PTA Allotments : Staff Appreciation	2,175
PTA Allotments Teacher Allotment	300
PTA School Activities: Donuts with Dad	444
PTA School Activities Field Day	172
PTA School Activities Leap	20
PTA School Activities . Muffins with Mom	534
PTA School Activities: Odyssey of the Mind	500
PTA School Activities Playground	29,224
Student-Family Assistance . Family Assistance	190
	\$ 45,077

#### 2008

#### · Federal Financial Statements

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# VIRGINIA CONGRESS OF PARENTS AND TEACHERS ORGANIZATIONS Sycolin Creek Elementary PTA

32-0198827

Statement 3 Form 990-EZ, Part III, Line 28 Statement of Program Service Accomplishments

	Grants : Allocati		-	n Service enses
Funds allocated to support administrative functions in the providing of additional resources to classrooms at Sycolin Creek Elementary School	\$	-	\$	1,966
Funds allocated to support field trips for individual classes associated with courses taught in the classroom		-		5,400
Funds allotted for school supplies and other materials to teachers from kindergarten to 5th Grade in support of various classroom activities		-		6,332
Funds allocated in the acquisition and construction of a playground for the use of students at the school				29,224
Funds allocated to other activities such Dare, Staff Appreciation, and other activities involving parents teachers and students	<del></del>			2,155
	\$		\$	45,077