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Department of the Treasury Internal Revenue Service

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)

OMB No 1545-0047

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

Open to Public Inspection

<u>A</u>	For the	e 2008 calendar year, or tax year beginning $$ JUL 1 , 2008 and endi	ng J	<u>UN 30, 2009</u>					
В	Check if applicable	Please use IRS C Name of organization		D Employer identific	cation number				
Γ.	Addre	ess label or reprint or KLEIN SUPPORT GROUPS - KLEIN ISD FFA							
Ĕ	Name	type		42-1	592545				
Ē	Initial	See Number and street (or P.O. box if mail is not delivered to street address) Roor	n/suite	E Telephone numbe	r				
Ē	Termi	Charifie		832-	484-4327				
Ē	Amen	ded tions Coty or town state or country, and ZID + 4		G Gross receipts \$	329,374.				
Ē	Applic			H(a) Is this a group re	etum				
	pendi	F Name and address of principal officer KEVIN WRIGHT		for affiliates?	Yes X No				
		SAME AS C ABOVE		H(b) Are all affiliates inc	luded? Yes No				
ī	Tax-ex	empt status X 501(c) (3		If "No," attach a	list. (see instructions)				
J	Websi	te: ► N/A		H(c) Group exemptio	n number 🕨				
K	Type of	organization: Corporation Trust X Association Other	L Year	of formation: 1985 N	State of legal domicile: TX				
F	art I	Summary							
a	1	Briefly describe the organization's mission or most significant activities CHARITE	BLE	FUNDRAISIN	G FOR KLEIN				
Governance		ISD FFA STUDENTS AND CLUBS.							
Ž	2	Check this box if the organization discontinued its operations or disposed of	of more	than 25% of its asset					
Š	3	Number of voting members of the governing body (Part VI, line 1a)		3	220				
		Number of independent voting members of the governing body (Part VI, line 1b)		4	0				
٥	5	Total number of employees (Part V, line 2a)		5	0				
ctivities &	6	Total number of volunteers (estimate if necessary)		6	0				
_₹	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)		<u>7a</u>	91,222.				
<u>^</u> 1000 1000 1000 1000 1000 1000 1000 10	b	Net unrelated business taxable income from Form 990-T, line 34	· .	7b	0.				
າ ∌ຸ				Prior Year	Current Year				
7 P	8	Contributions and grants (Part VIII, line 1h)		<u>277,902.</u>	238,152.				
ā	9	Program service revenue (Part VIII, line 2g)	-	93,955.	90,650.				
ران م	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,492.	572.				
,		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		373,349.	220 274				
j		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-	301,077.	329,374. 268,225.				
:		Grants and similar amounts paid (Part IX, column (A), lines 1-3)							
		Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-						
Fynenses	15		4,118.						
ğ	loa	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)		7,110.					
ŭ	17			73,530.	52,068.				
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25, CELVEL	3 <u> </u>	378,725.	320,293.				
	19	Revenue less expenses. Subtract line 18 from line 12		-5,376.	9,081.				
<u>_</u>	S		110	Beginning of Year	End of Year				
ets	20 20	Total assets (Part X, line 16) MAY 2 4 2010) <u> 8</u>	29,521.	40,162.				
Ass	gg 21	Total liabilities (Part X line 26)		-	1,560.				
Net Assets or	22	Net assets or fund balances Subtract line 21 from line 20 OGDEN, U	ا ا	29,521.	38,602.				
	art II	Signature Block							
_		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and stat and complete. Declaration of greparer (other than officer) is based on all information of which preparer has any kni	ements, a	and to the best of my knowled	ge and belief, it is true, correct,				
		and complete operation of graphs (office that office) is based of all mornation of which propagations and any	omougo	ر سر					
Si	gn	Lever Wiffel			-20/0				
He	ere	Signature of officer		Date					
		KEVIN WRIGHT PRESIDENT							
_		Type or print name and title	- Ob-	-1.4					
Pa	Preparer's Date Check if Preparer's identifying number (see instructions) Preparer's identifying number (see instructions)								
_	 eparer's	Signature Firm's name (or		ployed 🕨 💹					
Use Only yours if									
	•	self-employed), address, and		n					
_		ZIP+4		Phone no.					
Mi	ay the I	RS discuss this return with the preparer shown above? (see instructions)		· · ·	Yes No				

		LEIN SUPPO					42-159	2545	Page 2
Pa	rt III Statement of Prog								
1	Briefly describe the organization					ONTINUATIO			
	FUNDED YOUTH DE								
	ORGANIZATIONS.					<u>ISD FFA PR</u>			
						ADD-ON'S,			
	TENT SALE. THE	E BOOSTER	CLUBS_F	LSO RE	CEIVE F	FUNDS TO E	E USED FO	R THE	IR
2	Did the organization undertak	ke any significant i	program servic	es during the	year which v	vere not listed on			
	the prior Form 990 or 990-EZ'	?						Yes	X No
	If "Yes", describe these new	services on Sched	dule O						
3	Did the organization cease co	onducting, or make	e significant ch	anges in how	t conducts,	any program servi	ces?	Yes	X No
	If "Yes", describe these chan-	ges on Schedule	0						
4	Describe the exempt purpose	e achievements fo	r each of the o	rganization's	three largest	program services t	oy expenses		
	Section 501(c)(3) and 501(c)(4	4) organizations ai	nd section 494	7(a)(1) trusts	are required	to report the amou	nt of grants and		
	allocations to others, the tota	l expenses, and re	evenue, if any,	for each prog	jram service i	reported.			
4a	•	xpenses \$		ıncludıng g		238,152.)
	PAYMENTS TO STU	JDENTS FOR	R CONTRI	BUTION	S RECE	IVED AT SH	IOWS AND A	UCTIO	NS.
	FFA STUDENTS FF	ROM KLEIN	ISD HIC	H SCHO	OLS.				
		· ·							
						•			
								.	
									
						 			
				-					
			<u> </u>			12 000	\ <u></u>		
4b	•	xpenses \$		including g		•) (Revenue \$)
	GIVEN TO BOOSTE						HOLARSHIE	S TO	
	STUDENTS. KLEI	IN ISD HI	GH SCHOO	DL BOOS	TER CLU	JBS.			
		·				<u> </u>			
					=:				
							_		
4c	(Code) (E	xpenses \$		ıncludıng g	rants of \$	4.491.) (Revenue \$)
	REIMBURSED CHAP	•	R THEIR			ENERAL AG	• •	NSES.	,
		SCHOOL FI				<u> </u>			
	KEEIN IED HIGH	Benedi I	ti Cilii	LIKD.					
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							<u>-</u>		
		_ 				<u> </u>			
4d	Other program services (Des								
	(Expenses \$ 300, 7	780 including) (Rev	enue \$)		
4e	Total program service expen	nses ▶ \$	300,7	780. (Mu:	st equal Part	IX, Line 25, column	(B).)		
_								Form 99	90 (2008)

			Yes	No
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		163	140
١,	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
3	public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		х
4	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
5	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		ĺ
c	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice			
6	on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
-	Did the organization receive or hold a conservation easement, including easements to preserve open space,	Ť		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	r.		
8	Schedule D, Part III	8		х
^	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
40	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
10	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25?			
11		11	x	
40	If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	-''-		
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		х
40		13		X
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
14a	Did the organization maintain an office, employees, or agents outside of the US? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
b		14b		x
4-	and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity			- 1
15		15		x
40	located outside the United States? If "Yes," complete Schedule F, Part II Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15_	-	- 25
16		16		X
4-	located outside the United States? If "Yes," complete Schedule F, Part III Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		X
17	Did the organization report more than \$15,000 on Part IX, column (X), lines 1 c and 8a? If "Yes," complete Schedule G, Part II	18		X
18	Did the organization report more than \$15,000 total on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
19		20		X
20 24	Did the organization operate one or more hospitals? If "Yes," complete Schedule H Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 17 if "Yes," complete Schedule I, Parts I and III	22		X
22	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	-	X
23 242	Did the organization ariswer fees to Part VIII, Section A, questions 3, 4, or 57 if fees, complete schedule 3. Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the		 	
24a	last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K.			
	If "No", go to question 25	24a		X
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		_ -
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
U	any tax-exempt bonds?	24c		
H	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a			
	prior year? If "Yes." complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial			
	contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		X
	The state of the s		990	

	•		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an			
	indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other			
	person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization?			
	If "Yes," complete Schedule L, Part IV	28b		Х
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional			
	corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			
	If "Yes," complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X

Form **990** (2008)

Form 990 (2008) KLEIN SUPPORT GROUPS - KLEIN ISD FFA 42-1592545 Pa

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the internal Revenue Code.)

Sec	tion A. Governing Body and Management			
•			Yes	No
	For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances,			
	processes, or changes in Schedule O. See instructions			
1a	Enter the number of voting members of the governing body 1a 220			
b	Enter the number of voting members that are independent . 1b 0			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		<u> </u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		_ <u>X</u> _
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<u>_X</u> _
6	Does the organization have members or stockholders?	6		_X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		_X_
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
	D II I I I I I I I I I I I I I I I I I	9a		X
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,			
_	and branches to ensure their operations are consistent with those of the organization?	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must			
	describe in Schedule O the process, if any, the organization uses to review the Form 990	10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
• •	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	11		X
Sec	tion B. Policies			
			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
~	to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
Ī	in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13		X
14	Does the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision:			
•	The organization's CEO, Executive Director, or top management official?	15a		х
h	Other officers or key employees of the organization?	15b		X
U	Describe the process in Schedule O (see instructions)			
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
·va	taxable entity during the year?	16a		х
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	100		
D	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
202	exempt status with respect to such an angements?	100		
	List the states with which a copy of this Form 990 is required to be filed NONE			
17 10	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available	for		
18	·			
	public inspection. Indicate how you make these available. Check all that apply			
40	Own website Another's website X Upon request	v4 €	noici	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, at	iu IINS	uiciai	
	statements available to the public.	-		
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organizar	ion 🏴	_	
	DARLA MILLS - 713-622-7000			
	P.O. BOX 12057, SPRING, TX 77391-2057			

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees; highest compensated employees, and former such persons

X Check this box if the organization did not c	ny officer, director, truste						e, or key employee.			
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	١.	Position					Reportable	Reportable	Estimated
	hours per		check all that		that	at apply)		compensation from	compensation from related	amount of other
	week	Individual trustee or director				1		the	organizations	compensation
		ordi	8		Vincer Key employee Highest compensated employee Former			organization	(W-2/1099-MISC)	from the
		rustee	Institutional trustee	l	8	шреп		(W-2/1099-MISC)		organization
		tgnal	utions	 	Key employee	est co	 =			and related organizations
		rigi.	insti	Officer	Key	きゅ	Ē			Organizations
KEVIN WRIGHT										
PRESIDENT	3.00	х						0.	0.	0.
DARLA MILLS										
TREASURER	4.00	X						0.	0.	0.
DANA MORROW										
TREASURER	3.00	X			_	_		0.	0.	0.
SHEILLA STALL										_
SECRETARY	3.00	X	<u> </u>			<u> </u>	<u> </u>	0.	0.	0.
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(A) Name and title	(B) Average		1	() Posi	C) ition	ı		(D) Reportable	(E) Reportable		Es	(F) timate	:d
. Hand and did	hours					арр	ly)_	compensation	compensation from related		am	ount o	
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fro orga and	pensation the anizati I relate nizatio	e on ed
											_		
						_							
Total Total number of individuals (including the compensation from the organization	se in 1a) who re	ceiv	ed n	nore	tha	n \$1	00,0	0 . 000 in reportable		0.		· -	0.
3 Did the organization list any former office line 1a? If "Yes," complete Schedule J for			e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on		3	Yes	No X
4 For any individual listed on line 1a, is the and related organizations greater than \$1	sum of reportab 50,000? If "Yes	le co , " co	mple	ete S	Sch	edule	e <i>J f</i>	for such individual		Ī	4		Х
5 Did any person listed on line 1a receive of the organization? If "Yes," complete Sche Section B. Independent Contractors				rom	any	unr	elat	ed organization for serv	ices rendered to		5		X
Complete this table for your five highest of the organization NONE	compensated in	depe	ende	ent c	ont	racto	ors t		\$100,000 of com	pensa	_		
(A) Name and busines	s address							(B) Description of s	services	С	(C omper	s) nsation	n
							_		<u> </u>				
												_	
2 Total number of independent contractors	(including thos	e in '	1) wł	no re	ecer	ved	mor	e than \$100,000 in com	pensation	. <u></u>			
from the organization	0				-			<u></u>			Form 9	990 ¢	2008)

Form	990 ((2008) KLEIN SUPPORT GROUPS -	<u>- KLEIN IS</u>	D FFA	<u>42-1592</u>	545 Page 9
Par	t VII					
•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-11 \$				
Sor	_	Total. Add lines 1a-1f	238,152.			
		SPECIAL EVENTS Business Code 900099	90,650.		90,650.	
Program Service Revenue	c d					
jo	е					
-		All other program service revenue Total Add lines 2a-2f	90,650.	-		
\rightarrow		rotal. red in locate.	30,030.			-
	3	Investment income (including dividends, interest, and other similar amounts) Income from investment of tax-exempt bond proceeds	572.		572.	
	5	Royalties				
	•	(i) Real (ii) Personal				
	6 a	Gross Rents				
	b	Less rental expenses				
	С	Rental income or (loss)				
	d	Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less. cost or other basis				
		and sales expenses		1		
	_	Gain or (loss)				
- 1		Net gain or (loss)		-		
Other Revenue	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See				
Ę		Part IV, line 18				
ŧ.	ь	Less direct expenses b				
0	С	Net income or (loss) from fundraising events				
	9 a	Gross income from gaming activities See				
1		Part IV, line 19 a				
	b	Less: direct expenses b				
	С	Net income or (loss) from gaming activities				
l	10 a	Gross sales of inventory, less returns				
		and allowances . a				
		Less: cost of goods sold b				
<u> </u>	C	Net income or (loss) from sales of inventory			<u>.</u>	
-		Miscellaneous Revenue Business Code		!		
	11 a			-		
	b		<u> </u>		-	
	C				_	
	d	All other revenue				<u> </u>
			329,374.	0.	91,222.	0.
83200 02-02-	12 9 09	Total Revenue Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			<u>, , , , , , , , , , , , , , , , , , , </u>	Form 990 (2008)

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comple				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	268,225.	268,225.		_
3	Grants and other assistance to governments,				
_	organizations, and individuals outside the U.S				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
-				-	
7	Other salaries and wages Pension plan contributions (include section 401(k)				-
8					
_	and section 403(b) employer contributions)		-		
9	Other employee benefits				
10	Payroll taxes		-		
11	Fees for services (non-employees)				
a	Management				
b	Legal .	CE 0		<u> </u>	
С	Accounting	650.		650.	
d	Lobbying .	-			
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other			 _	
12	Advertising and promotion .				
13	Office expenses	681.		681.	
14	Information technology .				
15	Royalties .				
16	Occupancy .				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	334.			
23	Insurance	276.	_	276.	
24	Other expenses, Itemize expenses not covered				
- -1	above. (Expenses grouped together and labeled				
	miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	BOOSTER CLUBS	17,291.			17,291.
a h	BUCKLES AND TROPHIES	8,304.	8,304.		<u> </u>
0	CONCESSION STAND EXPENS	7,590.	7,590.		
ن	BUYER SOLICITATION	4,437.	4,437.		
a	CATALOG EXPENSE	4,150.	4,150.		
e		8,355.	8,074.	281.	-
f OF	All other expenses	320,293.	300,780.	1,888.	17,291.
25	Total functional expenses. Add lines 1 through 24f	340,493.	300,100.	1,000.	<u> </u>
26	Joint Costs. Check here Juf following				
	SOP 98-2. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	<u></u>			
92201	D 12-18-08				Form 990 (2008)

			(A) Beginning of year		(B) End of y	ear	_	
	1	Cash · non-interest-bearing	28,685.	1	39	,552	_	
ĺ	2	Savings and temporary cash investments		2		1 - 3 -	Ť	
	3	Pledges and grants receivable, net		3			_	
	4	Accounts receivable, net		4			_	
	5	Receivables from current and former officers, directors, trustees, key						
	3	employees, or other related parties Complete Part II of Schedule L		5				
	6	Receivables from other disqualified persons (as defined under section					_	
	U	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete						
		Part II of Schedule L		6				
"	7	Notes and loans receivable, net		7				
Assets	8	Inventories for sale or use		8			_	
As	9	Prepaid expenses and deferred charges		9	-		_	
	_	Land, buildings, and equipment: cost basis 10a 1,045	··· = =				_	
		Less accumulated depreciation Complete	<u> </u>					
	b	Part VI of Schedule D 543	. 836.	10c		502		
1	11	Investments - publicly traded securities	0301	11			_	
	12	Investments - other securities See Part IV, line 11		12			_	
	13	Investments - program-related. See Part IV, line 11		13		-	_	
	14	Intangible assets		14			_	
	15	Other assets See Part IV, line 11		15		108		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	29,521.	16	4(162		
\rightarrow	17	Accounts payable and accrued expenses	25,5211	17		,,102		
		·		18			_	
	18	Grants payable Deferred revenue		19				
	19			20			_	
	20	Tax-exempt bond liabilities Escrow account liability Complete Part IV of Schedule D		21			_	
ties	21			<u>~ 1</u>	-··· - · · · · · · - · ·			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II						
Lia				22				
1		of Schedule L		23				
-	23	Secured mortgages and notes payable to unrelated third parties		24				
	24	Unsecured notes and loans payable	0.	25	•	L,560		
	25	Other liabilities. Complete Part X of Schedule D	0.	26		L,560		
$\overline{}$	26	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ☐ and complete	<u> </u>	20		.,500	•	
.								
ces		lines 27 through 29, and lines 33 and 34.		27				
틸	27	Unrestricted net assets		28			_	
B	28	Temporarily restricted net assets Permanently restricted net assets		29			_	
Fund Balanc	29	Organizations that do not follow SFAS 117, check here		25			_	
Ē		, , , , , , , , , , , , , , , , , , , ,						
Net Assets or	20	complete lines 30 through 34. Capital stock or trust principal, or current funds	0.	30		O).	
se	30	Paid-in or capital surplus, or land, building, or equipment fund	0.	31) .	
۲	31	Retained earnings, endowment, accumulated income, or other funds	29,521.	32	31	3,602		
Ž	32	Total net assets or fund balances	29,521.	33		3,602		
	33 34	Total liabilities and net assets/fund balances	29,521.	34		0,162		
Par						<i>,</i> <u> </u>		
	• /	Timunotal otatemente and hoporang			· · · · · · · · · · · · · · · · · · ·	Yes N	0	
1	Acco	ounting method used to prepare the Form 990 X Cash Accrual	Other				_	
' 2а		e the organization's financial statements compiled or reviewed by an independent			2a	X	7	
		the organization's financial statements audited by an independent accountant?			2b		<u>-</u>	
		es" to lines 2a or 2b, does the organization have a committee that assumes response		e audr			_	
C		w, or compilation of its financial statements and selection of an independent acc			'2c			
32				_				
Ja	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A 133?							
h		es," did the organization undergo the required audit or audits?	•		3a 3b		<u>ζ</u>	
	12-18				1	990 (200)8)	

SCHEDULE A

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

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.

2008

Open to Public Inspection

Employer identification number

Schedule A (Form 990 or 990-EZ) 2008

42-1592545 KLEIN SUPPORT GROUPS - KLEIN ISD FFA Reason for Public Charity Status (All organizations must complete this part) (see instructions) Part I 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). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 3 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 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete the Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III · Functionally integrated d ___ Type III - Other a Type I **b** Type II 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 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? 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 h (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (vii) Amount of (ii) EIN organization in col. (i) organized in the organization in col. (i) listed in your organization in col. support organization (described on lines 1-9 organized in the U.S.? governing document? (i) of your support? above or IRC section Yes No Yes No Yes No (see instructions))

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organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Pa	art III Support Schedule for (Organizations	Described in	Section 509(a)	(2) (Complete only	if you checked the	box on line 9 of Part I \
	ction A. Public Support	<u> </u>			(Complete only	ii you checked the	box on line 9 of Fair 1.
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Gifts, grants, contributions, and membership fees received (Do not						
	include any "unusual grants.")	209,611.	253,648.	271,815.	<u>277,902.</u>		1012976.
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	53,025.	53,920.	72,906.	93,955.		273,806.
3	Gross receipts from activities that				_		
	are not an unrelated trade or bus- iness under section 513				_		
4	Tax revenues levied for the organ-						-
	ization'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 - 5	262,636.	<u>307,568.</u>	344,721.	371,857.		1286782.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons	_			İ		<u> </u>
t	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						
(Add lines 7a and 7b						
	Public support (Subtract line 7 c from line 6)						1286782.
	endar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
	Amounts from line 6	262,636.	307,568.	344,721.	371,857.		1286782.
10	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	,						
11	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						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support (Add lines 9, 10c, 11, and 12)						1286782.
14	First five years. If the Form 990 is for check this box and stop here	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3) orgar	nization,
Se	ction C. Computation of Publ	ic Support Per	rcentage				
15	Public support percentage for 2008 (line 8, column (f) di	ivided by line 13, o	column (f))		15	100.00 %
16	Public support percentage from 2007 ction D. Computation of Investigation	Schedule A, Part	IV-A, line 27g			16	%
17	Investment income percentage for 20	008 (line 10c, colun	nn (f) divided by lir	ne 13, column (f))		17	.00 %
	Investment income percentage from : 33 1/3% support tests - 2008. If the			n line 14 and line	15 is mara than 3	18 3 1/3% and line	%
	more than 33 1/3%, check this box a	nd stop here. The	organization quali	fies as a publicly s	supported organization	ation	$\triangleright X$
t	o 33 1/3% support tests - 2007. If the line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th			990 or 990-EZ) 2008

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

2008
Open to Public Inspection

Name of the organization

TTN CIIDDODT CDOIDC - VI.TN TCD FFA

Employer identification number 42-1592545

Schedule D (Form 990) 2008

Date	t I Organizations Maintaining Donor Advised	TO - RUEIN IDD FFA	or Accounts Complete if the
Pai			or Accounts. Complete it the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
		(a) Bollor advisod fallas	(b) Turida and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (dunng year)		
4	Aggregate value at end of year		ie . d-
5	Did the organization inform all donors and donor advisors in w		
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor ac		
_	for charitable purposes and not for the benefit of the donor or		
Pai			Part IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or pl		storically important land area
	Protection of natural habitat	Preservation of certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conse	ervation contribution in the form of a cor	servation easement on the last day
	of the tax year.		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru		. 2c
d	Number of conservation easements included in (c) acquired a		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the taxable
	year ▶		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, violations, a	
	enforcement of the conservation easements it holds?		L Yes L No
6	Staff or volunteer hours devoted to monitoring, inspecting, ar		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	the organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections of		Other Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8	
1a	If the organization elected, as permitted under SFAS 116, not		
	treasures, or other similar assets held for public exhibition, ed	lucation, or research in furtherance of pi	ublic service, provide, in Part XIV, the text of
	the footnote to its financial statements that describes these if		
b	• • •		
	or other similar assets held for public exhibition, education, or	r research in furtherance of public servic	e, provide the following amounts relating to
	these items		
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financi	
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$ ▶ \$

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	dule D (Form 990) 2008 KLEIN S'	UPPORT GRO								Page 2	
3	Using the organization's accession and other										
3	that apply):	r records, check any	y or the to	mowning tria	t are a signi	ncant us	e or its cor	ilection ite	ins (checr	v ali	
	Public exhibition	c	. —.	oan or evol	hange prog	rame					
a	Scholarly research	_			nange prog						
b		•	, ,)(I)(E)							
C	Preservation for future generations	-114						D	4 3/13/		
4	Provide a description of the organization's co							ose in Par	LAIV		
5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets										
D	to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No Port IV Trust Force and Custodial Arrangements Constant Con										
Part IV Trust, Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21											
					46						
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontribution	s or other a	ssets no	t incluaea		٦.,	┌ ┐	
	on Form 990, Part X?							<u> </u>	」Yes	└── No	
ь	of "Yes," explain the arrangement in Part XIV and complete the following table:										
								-	Amount		
С	Beginning balance						1c				
d	Additions during the year .	•				-	<u>1d</u>				
е	Distributions during the year .						1e				
f	Ending balance .		•		•		1f		_		
	Did the organization include an amount on Form 990, Part X, line 21?								_ Yes	L∐ No	
	b If "Yes," explain the arrangement in Part XIV										
Par	t V Endowment Funds. Complete	f organization answe	ered "Yes	to Form 9							
		(a) Current year	(b) Pri	or year	(c) Two yea	ers back	(d) Three	ears back	(e) Four	/ears back	
1a	Beginning of year balance										
b	Contributions										
С	Investment earnings or losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
q	End of year balance										
2	Provide the estimated percentage of the year	r end balance held a	as								
а	Board designated or quasi-endowment										
b	Permanent endowment	%	_								
c	Term endowment	 %									
3a	Are there endowment funds not in the possession of the organization that are held and administered for the organization										
	by Yes No										
	(i) unrelated organizations										
	(ii) related organizations				•			•	3a(ii)		
ь									3b		
4	Describe in Part XIV the intended uses of the organization's endowment funds										
Par	t VI Investments - Land, Building				Part X. line	10					
Description of investment (a) Cost or other (b) Cost or other (c) Depreciation (d) Book value								value			
	Возоприон от интестием	basis (investi		basis (other)				(-)			
	Land	`			· · · ·	_		-			
	Buildings					<u> </u>					
5	Leasehold improvements		1			†					
d	Equipment					 	···· -· · · ·				
	Other				1,045.	 	5	43.		502.	
	. Add lines 1a-1e (Column (d) should equal Fo	orm 990 Part X colu	ımn (R) lu		<u> </u>	1		<u> </u>		502.	

Schedule D (Form 990) 2008

Schedule D	(Form 990) 2008	KLEIN	SUPPOR	T GROUPS -	- KLEIN	ISD F	FA 42	-1592545	Page 3		
	Investments		i ties . See l	Form 990, Part X, lir	ne 12						
(a) Description of security or category (including name of security)				(b) Book value		(c) Method of valuation: Cost or end-of-year market value					
Financial de	erivatives and other	financial products									
Closely-held	d equity interests		_								
Other							_				
								 -			
			·								
	•	· · · · · · · · · · · · · · · · · · ·									
	o) should equal Form										
Part VIII	Investments	- Program Rel	ated. See	Form 990, Part X, I	ine 13.						
	(a) Description of i	nvestment type						d of valuation			
	· · · · · · · · · · · · · · · · · · ·					Cos	st or end-of-year ma	rket value			
						•					
									<u> </u>		
						•					
				· · · · · ·							
									-		
	-										
	<u>-</u>										
Total. (Col (L	o) should equal Form	990, Part X, col (B) lı	ne 13.) 🖊								
Part IX	Other Assets	See Form 990, P						(b) Book va	alue.		
 			(a) De	escription				(b) Book va			
		· · · · · · -		 							
									• •		
						·			-		
							_				
							-				
				 							
					- · · · · · · · · · · · · · · · · · · ·						
Part X	ımn (b) should equa	<i>ies.</i> See Form 99					<u> </u>	1			
raitx	(a)	Description of liabi	u, Fart A, IIII lity	le 25	(b) Amo	ount			•		
Federal inc	ome taxes	·	- <u>-</u>		<u>`</u>						
INSURANCE - RESERVE ACCOUNT			UNT			1,560.					
					`						
	-										
		15 000 5		05.1	 -	1 500					
TOTAL (CON	ımn (b) should equa	ıı rorm 990, Part X	, coi (B) line	∠ 3) ▶		1,560.					

Schedule D (Form 990) 2008

under FIN 48. 832053 12-23-08

	dule D (Form 990) 2008 KLEIN SUPPORT GROUPS - KLEIN ISD FFA	onte	42-15	92545 Pag	e 4
				329,37	_
1		-		320,29	
2 .	Total expenses (Form 990, Part IX, column (A), line 25) Excess or (deficit) for the year Subtract line 2 from line 1 3	+		9,08	
3		$\neg \neg$		3,00.	<u> </u>
4				- · · · · · · · · · · · · · · · · ·	
5	Donated services and use of facilities	-		 	
6	Investment expenses 6	+		-	
7	Prior period adjustments				—
8	Other (Describe in Part XIV) Tatal adjustments (net) Add lines 4.8				
9	Total adjustments (net) Add lines 4-8 Evenue or (defeat) for the year pay (name of the property of the page 2 and 2			9,08	1
10 Pa	Excess or (deficit) for the year per financial statements		Return	9,00.	<u> </u>
1	Total revenue, gains, and other support per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments 2a				
b	Donated services and use of facilities		<u> </u>		
С	Recoveries of prior year grants 2c				
d	Other (Describe in Part XIV)]		
е	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.				
a	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIV) 4b		1		
c	Add lines 4a and 4b		4c		
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)		5		
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expense	es per	Return	·	
1	Total expenses and losses per audited financial statements		1		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities 2a				
b	Prior year adjustments 2b		1		
c	Losses reported on Form 990, Part IX, line 25		1 1		
d	Other (Describe in Part XIV)				
e	Add lines 2a through 2d		2e		
3	Subtract line 2e from line 1		3		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIV)		7		
	Add lines 4a and 4b		4c		
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5		
Par	t XIV Supplemental Information	•			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV	lines 1	lb and 2h F	Part V line 4 Par	 rt
	rt XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b.	,	, o and 25, 1	urt v, 1110 4, 1 u	•
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SCHEDULE O (Form 990)

Department of the Treasury

Supplemental Information to Form 990

➤ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008
Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization KLEIN SUPPORT GROUPS - KLEIN ISD FFA 42-1592545 FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: PURPOSE INCLUDING SCHOLARSHIPS. FORM 990, PART VI, SECTION A, LINE 10: MINUTES AND TREASURER REPORTS ARE READ AT EVERY MEETING AND COPIES DISTRIBUTED TO ALL ATTENDEES. FORM 990, PART VI, SECTION C, LINE 18: MINUTES AND TREASURER REPORTS ARE READ AT EVERY MEETING AND COPIES DISTRIBUTED TO ALL ATTENDEES. FORM 990, PART VI, SECTION C, LINE 19: MINUTES AND TREASURER REPORTS ARE READ AT EVERY MEETING AND COPIES DISTRIBUTED TO ALL ATTENDEES