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# Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4847(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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

OMB No. 1545-1150

2009

Open to Public Inspection

		t of the Treasury	"		assets less than zation may have	\$1,250,000					ante			nspe	ction
_		renue Service he 2009 calenda	<del></del>				July 1	<del></del>		nd ending		une 30			, 20 09
		if applicable		C Name of o			ouly I		, di	orienty				ication n	
$\bar{\Box}$		ss change	use IRS		ementary Sch	nool P T A								56278	· ·
	Name	change			street (or P.O bo		not delivered to	street addr	ess) I	Room/surte	E Telepi				
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片	Termur		Specific (		state or country						F Grou				<del></del>
H		ded return ation pending	Instruc-	-	ourg, VA 2240							pexe ber ≱	•	ion	3229
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	- 30	ection 501(c)(3)			edule A (Form			sts must a	uacn	1	(specify)		<u>.</u>	Casiii	Acciual
_							-		•	H Check	···		raa	nization	is not
	Web	site: ▶											-		orm 990,
		exempt status (	check only	y one) — 🗸	501(c)( )	◀ (insert r	no.) 🗌 494	7(a)(1) or	527	- 1 '	Z, or 990				
	Chec		·		section 509(a			<del></del>			normally i	not m	ore t	han \$25	.000. A
		990-EZ or Forn	•				• •		•	•	•				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
_		nes 5b, 6b, and 7			·		<del></del>		<del></del>			s			47622.38
	art!				d Changes							ctions	s fo	r Part	l.)
	1				nd similar an	-						1			4469.35
	2		. •	. •	uding govern							2			0
5	3	-			sments							3			1420.00
2010	4											4			332.49
	5	a Gross amo	ount from	sale of as	sets other th	nan invento	orv		5a	3	1294.80				
6					sales expen		-		5b	1	3696.40				
==	1				ets other tha			-	om lin	e 5a)	1	5c			12598.4
_9	6	•			e applicable par					,					
<b>=</b> €		a Gross reve					of contrib		•	•	_				
٦Ó				-					6a	1	6274.89				
¥		b Less: direc	t expens	ses other ti	han fundraisi	ng expens	ses	[	6b		2821.38				
のことを Revenue			-		cial events a			t line 6b f	rom lir	ne 6a)		6c			3453.51
€	7	a Gross sale	s of inver	ntory, less	returns and	allowance	es		7a		3830.85				
		b Less: cost	of goods	s sold .				[	7b		5536.21				
90		c Gross prof	it or (loss	s) from sale	es of invento	ry (Subtra	ct line 7b fr	om line 7	a) .			7c			-1705.36
	8	Other reve	nue (desc	cribe▶ _							)	8			0
_	9	Total reve	nue. Add	d lines 1, 2	, 3, 4, 5c, 6c	, 7c, and 8	<u> </u>			<u> </u>	. ▶	9			20568.39
	10	Grants and	d similar a	amounts p	aid (attach s	chedule)	,					10			13384.79
	11	Benefits pa	aid to or 1	for membe	ers		/	· . DI	ECE	RB		11			0
e Se	12	Salaries, o	ther com	pensation	, and employ	ee benefit	ts 🛔			:IVFN	. 7	12			0
KDenses	13		al fees ar	nd other p	ayments to i	ndepende					7:1	13			0
		Occupanc	y, rent, ul	tilities, and	maintenand	е		닭 · NO	1 9	2 2042	မြို့	14			0
Ш	.0	Printing, p	ublication	ns, postag	e, and shipp	ing	[.*	<b>"</b> ]		e. 7.010 .	<u> S</u>	15			208.67
	16				state and c			, committ	ee exp	enses, train		16			1189.57
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88	19				at beginning		•	-	• • • •		1				
Net Assets		-	-	•	n prior year's	•					,	19			21865.25
Ž	20		-		or fund balan	•	•	•				20			07050.04
_	21   art				at end of yea assets on lin							21	od a	f Econ	27650.61
	arı	Dalance	9 31100		nstructions f		<u>`</u>	∌1,23U,UU	O OF IT	<del></del>	ginning of		iu c		
2	2	Cook coulnes	and last	•		-						year 65.25	22	(6) (6)	of year 27650.61
2		Cash, savings									218		23		2/650.61
2		Land and build Other assets (		_						`,			23 24		
2		Total assets (								-'	219	65.25			27650.61
2		Total liabilitie								; <del>  -</del>	210		25 26		27030.01
2	<del>,</del> 7	Net assets or	fund hel	lances (lin	e 27 of colu	mn (B) mu	et anree w	ith line 21	1	-'	218	65 25			27650 61



Part	Statement of Program Service Accom	plishments (See the instr	uctions for Part II	l.)		Expenses	
What is the organization's primary exempt purpose? Support students, parents and school faculty							
	ibe what was achieved in carrying out the org					)(3) and 501(c)(4) exations and section	
	er, describe the services provided, the number oprogram title.	of persons benefited, and o	other relevant info	mation for		(a)(1) trusts, optional	
28	Provide educational materials and equipment not fu	inded by school district. Prov	ride supplies for tea	cher and			
	student use such as books, publications, student a						
	who participate and excel in the standards of learni	ng assessments.					
	Grants \$ ) If this amount	includes foreign grants, ch	eck here	. ▶ 🗆	28a	13384.79	
29							
!	Grants \$ ) If this amount	t includes foreign grants, ch	eck here	. ▶ 🗆	29a	0	
30			***************************************			·	
	***************************************						
•		t includes foreign grants, ch	eck here	. ▶ 📙	30a	0	
	Grants \$ ) If this amount	includes foreign grants, ch	eck here	. ▶ 📙	31a	0	
Part	Total program service expenses (add lines 28a  List of Officers, Directors, Trustees, and Ke				32	tions for Port IV/	
rait	Dat of Officers, Directors, Trustees, and Ne	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper	plans &	account and other allowances	
Andn	ea Swope		911201 -0-1,	describe compa	ioauon	Olioi allowalicos	
	a Swope	President - 10	٥		0	o	
Elizat	eth Stark					<u></u>	
		- VP - 8	0		0	o	
Louis	e Harper Dawson		<del></del>				
	<del></del>	- Secretary -1	0		0	o	
Micha	el Stark	T 6	, , , , ,			, -	
		Treasurer - 6	0		0	0	
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Form 99	0-EZ (2009)		F	age 3
Part	Other Information (Note the statement requirements in the instructions for Part V.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		1
34	Were any changes made to the organizing or governing documents? 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 <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		1
ь	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a b	Enter amount of political expenditures, direct or indirect, as described in the instructions.     37a   0	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
b 39	If "Yes," complete Schedule L, Part II and enter the total amount involved			
a	Initiation fees and capital contributions included on line 9	}		
b	Gross receipts, included on line 9, for public use of club facilities	]		ĺ
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit			
	transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
С	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. 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		1
41	List the states with which a copy of this return is filed. ▶ Virginia			
42a		540-89	1-908	6
_	Located at ► 10321 Watford Lane, Fredericksburg, VA ZiP + 4 ►	22	408	
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			T & 0
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	405	Yes	-
	account)?	42b	<del> </del> -	1
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ▶	42c	1	<b>√</b>
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			
			Vac	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of		. 03	110
	Form 990-EZ	44	<del>                                     </del>	1
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			1
	100; 1 cm 000 mate by compated meteda of 1 cm 000°LL	45	) EZ	

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Form	990-F7	いっつつり

Form 990	D-EZ (2009)				1	Page 4
Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 and	section 4947(a)(1) none 47(a)(1) nonexempt char ad 51.	exempt charitab ritable trusts mus	<b>le trusts only.</b> A t answer questio	Il section ns 46–49	—— Љ
	Did the organization engage in direct or indirect				Yes	No
	candidates for public office? If "Yes," complete s				46	1
	Did the organization engage in lobbying activities				47	<del>                                     </del>
	Is the organization a school as described in section Did the organization make any transfers to an ex				48 49a	<del>  \</del>
	If "Yes," was the related organization a section 5	'	· · · · · ·		49b	+
	Complete this table for the organization's five his	•				nd key
	employees) who each received more than \$100,0			f there is none, en	ter "None.	77
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expe account other allow	and
NONE		•				
		<del></del>				
			-			
				1		
			†			
			<u> </u>			
f	Total number of other employees paid over \$100	),000 ▶	<del></del>	-		
	Complete this table for the organization's five I \$100,000 of compensation from the organization  (a) Name and address of each independent contractor	n. If there is none, enter "N	None."	pe of service	(c) Compens	
NONE						
		<b></b>				
		********				
					<del></del>	
đ	Total number of other independent contractors e	each receiving over \$100,0	▶			
	Under penalties of penjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	ed this return, including accompa of preparer (other than officer) is	nying schedules and sta based on all information	tements, and to the bes	st of my know	vledge ge
Sign	Mil 1 D S	Have		11-13-	-20	10
Here	Signature of officer	5000	1	Date		
	Michael D. Stark Treasurer					
	Type or print name and title					
Paid	Preparer's	Date	Check if self-	Preparer's identifying nur	nber (See instru	uctions)
Prepare	signature Firm's name (or		employed ▶ ☐	1	<del></del>	
Use On	ty yours if self-employed),	<del></del> .	EI			
May the	e IRS discuss this return with the preparer shown	above? See instructions	Ph	one no. ▶	Yes 🗆	No
				Fo	m <b>990-E</b>	

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

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

Complete if the organization is a section 501(c)(3) organization or a section

Department of the Treasury ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Internal Revenue Service

4947(a)(1) nonexempt charitable trust.

Name of the organization Employer identification number Parkside Elementary School PTA 54 2056278 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). ☐ 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). 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: 5 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.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) R 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 331/6 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 D By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes 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(îii) h Provide the following information about the supported organization(s). (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 (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (ii) of your (i) organized in the (see instructions)) US? support? Yes No Yes Yes No NONE Total

Pai	Support Schedule for Org (Complete only if you chec					and 1	70(b)(1	)(A)(vi)
Sec	tion A. Public Support		•					
	lendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")							. <u>-</u>
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 through 3							<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)						1 4	
_6_	Public support. Subtract line 5 from line 4.							
	tion B. Total Support			r				
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
7	Amounts from line 4					-		
8	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>1                                    </u>	<u> </u>	İ	<u> </u>		
12	Gross receipts from related activities, etc.	. (see instructi	ons)			12		
13	First five years. If the Form 990 is for organization, check this box and stop he	re	<u></u>				a section	on 501(c)(3)
Sec	tion C. Computation of Public Su	pport Perce	entage					
14	Public support percentage for 2009 (line	6, column (f) d	livided by line 1	1, column (f))		14		%
15	Public support percentage from 2008 Sci	•	•			15		<u>%</u>
1 <b>6</b> a	33% % support test-2009. If the organi							
	and stop here. The organization qualifies	as a publicly	supported orga	nization				▶ □
b	33% % support test – 2008. If the organic box and stop here. The organization qua							
17a	10%-facts-and-circumstances test - 20	09. If the orga	nization did not	check a box on	line 13, 16a, or	16b, a	nd line 1	4 is 10% or
	more, and if the organization meets the "f organization meets the "facts-and-circum	acts-and-circu	mstances" test,	check this box	and stop here	. Explai	n in Part	IV how the
b	10%-facts-and-circumstances test-2008 more, and if the organization meets the "facts-and-circumstances the "facts-and-circumstances" and the second s	acts-and-circurances" test. The	nstances" test, e organization qu	check this box alifies as a publi	and <b>stop here.</b> cly supported or	Explair ganizat	n in Partion	IV how the
18	Private foundation. If the organization did	l not check a b	ox on line 13, 16	a, 16b, 17a, or	17b, check this	box an	d see ins	tructions 🕨 🗌

### 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.)

500	tion A. Public Support	ed the box of	i iiiie 9 oi Pa	11.)		<del></del>	
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(a) 2000	(6 Total
0.	alendar year (or iiscar year beginning iii)	(a) 2005	(b) 2006	(6) 2007	(u) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	20	10	0	380	0	410
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	50408	52754	60966	59348	49582	273058
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	50428	52764	60966	59728	49582	273468
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	0	0	0	0	0	0
с 8	Add lines 7a and 7b	0	0	0	0	0	0
500	tion B. Total Support					l	<del></del>
	alendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9		50428	52764	60966	59728	49582	273468
_	Amounts from line 6	0	0	0	0	0	0
b	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975	0	0	0	0	0	0
С 11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b,	<u>U</u>	U		U	U	<u> </u>
	whether or not the business is regularly carried on	0	0	0	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	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0
14	First five years. If the Form 990 is for organization, check this box and stop	here		nd, third, fourth	_		n 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Percer	ntage				
15	Public support percentage for 2009 (lin			e 13, column	(f))	15	100 %
16	Public support percentage from 2008 S			<u> </u>	<u></u> .	16	100 %
Sec	tion D. Computation of Investmen					···	
17	Investment income percentage for 2009	•	• • •	•	olumn (f)) .	17	0 %
18	Investment income percentage from 20					18	0 %
19a	17 is not more than 331/2 %, check this b	ox and <b>stop he</b>	ere. The organi	zation qualifies	as a publicly s	supported orga	nization 🕨 🗹
b	33% % support tests – 2008. If the organ line 18 is not more than 33% %, check this	s box and stop	<b>here.</b> The organ	nization qualifie	s as a publicly	supported orga	nization 🕨 🗌
<u>20</u>	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b	, check this bo	x and see inst	ructions 🕨 🗌

SCHOOLING A (F	om 990 or 990-EZ) 2009				Page 4
Part IV	Supplemental Information. C Part II, line 17a or 17b; and Pa	Complete this art III, line 12.	part to provide the Provide any other	explanations required additional information.	by Part II, line 10;
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## Parkside Elementary School PTA

54-2056278

Page 1, Line 10

Arts & Education	482.50
SOL Bikes	600.00
Grade Level Expenses	3,365.29
Multi Grade Support	1,668.40
Reflections Awards	188.85
Teacher Lunches (4 / year)	1,715.87
Teacher Appreciation	2,473.77
Teacher Supplies	 2,890.11
Total Grants	\$ 13,384.79

Attachment to Form 990-EZ for 2009