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AMENDED

0905

OMB No. 1545-0047

Form

90

Return of Organization Exempt From Income Tax

2008

Department of the Treasury
Internal Revenue ServiceOpen to Public
InspectionUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

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

DEC 18 '13

NO SIAIUE ISSUE
Postmark Missing
Activities & Governance
Revenue ExpensesNet Assets or
Fund Balances

SCANNED JAN 01 2014

Sign Here

Paid
Preparer's
Use Only

(HTA)

A For the 2008 calendar year, or tax year beginning

7/1/2008

, and ending

6/30/2009

Check if applicable
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

Please use IRS
label or
print or
type
See
Specific
Instruc-
tions.

C Name of organization CENTENNIAL HIGH SCHOOL FOUNDATION
 Doing Business As FOR THE FINE ARTS, INC
 Number and street (or P O box if mail is not delivered to street address)
 9310 SCOTT ROAD
 City or town, state or country, and ZIP + 4
 ROSWELL GA 30076-3417

D Employer identification number
 58-2328716
 E Telephone number
 (770) 475-8005
 G Gross receipts \$
 117,257

I Tax-exempt status 501(c) (3) ▶ (insert no) 4947(a)(1) or 527

J Website ► WWW CHSFFA.ORG

H(a) Is this a group return for affiliates? Yes X NoH(b) Are all affiliates included? Yes No

If "No," attach a list (see instructions)

H(c) Group exemption number ►

K Type of organization Corporation Trust Association Other ► L Year of formation 1997 M State of legal domicile GA

Part I Summary

1 Briefly describe the organization's mission or most significant activities: PROVIDES SUPPORT TO ALL FINE ART DISCIPLINES AT CENTENNIAL HIGH SCHOOL, ROSWELL, GA, INCLUDING BAND, CHORUS, ORCHESTRA, THEATRE AND VISUAL ARTS, TO PURCHASE BASIC SUPPLIES SUCH AS MUSIC, INSTRUMENTS, UNIFORMS, PAINTS, ART SUPPLIES, THEATRE PROPS AND PRODUCTION SUPPLIES, EQUIPMENT AND ASSOCIATED GROUP TRAVEL TO PERFORMANCES AND CLINICS

2 Check this box ► if the organization discontinued its operations or disposed of more than 25% of its assets

3 Number of voting members of the governing body (Part VI, line 1a) 3 8

4 Number of independent voting members of the governing body (Part VI, line 1b) 4 8

5 Total number of employees (Part V, line 2a) 5 0

6 Total number of volunteers (estimate if necessary) 6 250

7a Total gross unrelated business revenue from Part VIII, line 1a **STATE UNIT RECEIVED** 7a 0

b Net unrelated business taxable income from Form 990-T, line 34 7b 0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h) DEC 17 2013	32,944	14,047
9	Program service revenue (Part VIII, line 2g)	95,829	48,348
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) TPR BRANCH	127	84
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11d) OGDEN	30,440	19,331
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) RECEIVED	159,340	81,810
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3) 0	0	0
14	Benefits paid to or for members (Part IX, column (A), line 4) 0	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0	0	0
16a	Professional fundraising fees (Part IX, column (A), line 11e) 0	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) RECEIVED 0	0	0
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24d) OGDEN, UT RECEIVED	139,502	103,681
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25) OSC	139,502	103,681
19	Revenue less expenses Subtract line 18 from line 12 DEC 11 2013 OSC	19,838	-21,871

		Beginning of Year	End of Year
20	Total assets (Part X, line 16) E1	99,726	65,329
21	Total liabilities (Part X, line 26) OGDEN, UT	14,845	2,979
22	Net assets or fund balances Subtract line 21 from line 20 OSC	84,881	62,350

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer

Date

Type or print name and title

Preparer's signature	Date	Check if self-employed <input checked="" type="checkbox"/>	Preparer's identifying number (see instructions)
----------------------	------	--	--

Firm's name (or yours if self-employed), address, and ZIP + 4	R DANIEL MCNEELY, CPA, P.C.	EIN
---	-----------------------------	-----

Firm's name (or yours if self-employed), address, and ZIP + 4	P O BOX 974, ROSWELL, GA 30077	Phone no
---	--------------------------------	----------

EIN	(770) 594-8796
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May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2008)

Part III Statement of Program Service Accomplishments (see instructions)

1. Briefly describe the organization's mission:

PROVIDING SUPPLEMENTAL SUPPORT TO ALL FINE ART DISCIPLINES AT CENTENNIAL HIGH SCHOOL, ROSWELL GA., INCLUDING BAND, CHORUS, ORCHESTRA, THEATRE, AND VISUAL ARTS BY PURCHASING BASIC SUPPLIES SUCH AS MUSIC, INSTRUMENTS, UNIFORMS, PAINTS, ART SUPPLIES, THEATRE PRODUCTION SUPPLIES AND PROPS, EQUIPMENT AND ASSISTING WITH GROUP TRAVEL TO PERFORMANCES AND CLINICS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 60,970 including grants of \$ 0) (Revenue \$)
TRAVEL COSTS, FEES FOR FESTIVALS, PARADES, CAMP, SEMINARS, RECOGNITION AWARDS, BANQUETS, MUSIC,
EQUIPMENT, AND RELATED PROGRAM EXPENSES

4b (Code) (Expenses \$ 10,833 including grants of \$ 0) (Revenue \$)
PAYMENTS OF PROFESSIONALS TO ASSIST, ACCOMPANY AND TEACH THE BAND MUSIC STUDENTS IN PERFORMANCE
AND INSTRUCTIONAL CAMP

4c (Code:) (Expenses \$ 12,209 including grants of \$ 0) (Revenue \$ 0)
UNIFORM ACQUISITION AND MAINTENANCE OF SUCH FOR PERFORMANCES AND INSTRUCTIONAL CAMP

4d Other program services. (Describe in Schedule O.)

(Expenses \$ 19,528 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► \$ 103,540 (Must equal Part IX, Line 25, column (B))

Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A
- 2 Is the organization required to complete Schedule B, Schedule of Contributors?
- 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I
- 4 **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 5 **Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III
- 6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III
- 9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV
- 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V
- 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? 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
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 14a Did the organization maintain an office, employees, or agents outside of the U.S?
 - b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S? If "Yes," complete Schedule F, Part I
- 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II
- 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III
- 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I
- 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II
- 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III
- 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H
- 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II
- 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III
- 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J
- 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the 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
- 24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
- 24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
- 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?
- 25a **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
- 25b 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
- 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
- 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

	Yes	No
1	X	
2	X	
3	X	
4	X	
5		
6	X	
7	X	
8	X	
9	X	
10	X	
11	X	
12	X	
13	X	
14a	X	
14b	X	
15	X	
16	X	
17	X	
18	X	
19	X	
20	X	
21	X	
22	X	
23	X	
24a	X	
24b	X	
24c	X	
24d	X	
25a	X	
25b	X	
26	X	
27	X	

Part IV Checklist of Required Schedules (continued)

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
- b Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV
- c 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

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

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

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

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

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

	Yes	No
28a	X	
28b	X	
28c	X	
29	X	
30	X	
31	X	
32	X	
33	X	
34	X	
35	X	
36	X	
37	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable.

1a	0		Yes	No
1b	0			
1c	X			

1b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.

2a	0		2b	

2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? *Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)*

3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

3b If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*

4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

4b 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.*

5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?

5c If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?

6a Did the organization solicit any contributions that were not tax deductible?

6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?

7 **Organizations that may receive deductible contributions under section 170(c).**

7a Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?

7b If "Yes," did the organization notify the donor of the value of the goods or services provided?

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?

7d If "Yes," indicate the number of Forms 8282 filed during the year

7e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

7g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?

7h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?

8 **Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?

9 **Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.**

9a Did the organization make any taxable distributions under section 4966?

9b Did the organization make a distribution to a donor, donor advisor, or related person?

10 **Section 501(c)(7) organizations.** Enter.

10a Initiation fees and capital contributions included on Part VIII, line 12.

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.

11 **Section 501(c)(12) organizations.** Enter.

11a Gross income from members or shareholders

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).

12a **Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?

12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

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

Section A. Governing Body and Management

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 8
 b Enter the number of voting members that are independent 1b 8

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 X

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 X

4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 X

5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 X

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
 a The governing body? 8a X
 b Each committee with authority to act on behalf of the governing body? 8b X

9a Does the organization have local chapters, branches, or affiliates? 9a X
 b 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

	Yes	No
1a		
1b		
2	X	
3	X	
4	X	
5	X	
6	X	
7a	X	
7b	X	
8a	X	
8b	X	
9a	X	
9b		
10	X	
11	X	

Section B. Policies

12a Does the organization have a written conflict of interest policy? If "No," go to line 13
 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?
 c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done

13 Does the organization have a written whistleblower policy?
 14 Does the organization have a written document retention and destruction policy?
 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
 a The organization's CEO, Executive Director, or top management official?
 b Other officers or key employees of the organization?
 Describe the process in Schedule O. (see instructions).

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?
 b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?

	Yes	No
12a	X	
12b	X	
12c	X	
13		X
14	X	
15a	X	
15b	X	
16a		X
16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ► GEORGIA
 18 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 public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial 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 organization ► JILL ROSE, TREASURER (770) 650-4230
 9310 SCOTT RD, ROSWELL, GA 30076

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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
LINDA MINNICK									
CHAIRMAN	10		X				0	0	0
JAN FRIEMAN									
TREAS/ BAND PRES	10		X				0	0	0
KATHLEEN DEBUYS									
SEC	10		X				0	0	0
DOTTIE MELTON									
CO CHAIR	10		X				0	0	0
JEAN SOLOFF									
CO CHAIR	10		X				0	0	0
CONSTANCE LEBRON									
CHORUS PRES	10						0	0	0
MEREDITH DEAVER									
ORCH CO PRES	10						0	0	0
LISA RICHARDSON									
ORCH CO PRES	10						0	0	0
SUSAN WEYN									
THEATRE PRES	10						0	0	0
DEIDRA WILKINSON									
VISUAL ARTS	10						0	0	0
PEGGY WAGNER									
WEBMASTER	10						0	0	0
	0						0	0	0
	0						0	0	0
	0						0	0	0
	0						0	0	0
	0						0	0	0
	0						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)**

1b Total .

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► 0

3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

	Yes	No
3		X
4		X
5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

2	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization ►	0	

Part VIII. Statement of Revenue

			(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	1a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f	1a 1b 1c 1d 1e 1f \$ 0 0 0 0 0 14,047 0 ►				
Program Service Revenue	2a b GENERAL DISCIPLINE FEES c ACTIVITY INCOME d UNIFORMS/T SHIRTS e f All other program service revenue g Total. Add lines 2a-2f		Business Code			
	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties			43,629 4,610 109 0 0 ►	43,629 4,610 109 0 0 48,348	
Other Revenue	6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory	(i) Real 0 0 0 ►	(ii) Personal 0 0 0 0 0 ►			
	a 54,778 b 35,447 ► 19,331 a 0 b 0 ► 0 a 0 b 0 ► 0					
	Miscellaneous Revenue	Business Code				
	11a b c d All other revenue e Total. Add lines 11a-11d			0 0 0 0 0 ► 0		
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			81,810 ► 48,432	0 0	0

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	0			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	0			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	0			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	0			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0			
9 Other employee benefits	0			
10 Payroll taxes	0			
11 Fees for services (non-employees)				
a Management	0			
b Legal	0			
c Accounting	0			
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees	0			
g Other	0			
12 Advertising and promotion	0			
13 Office expenses	294	294		
14 Information technology	0			
15 Royalties	0			
16 Occupancy	0			
17 Travel	8,712	8,712		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19 Conferences, conventions, and meetings	0			
20 Interest	0			
21 Payments to affiliates	0	0	0	0
22 Depreciation, depletion, and amortization	0	0	0	0
23 Insurance	0			
24 Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a SEE ATTACHED LISTING	94,675	94,534	141	
b -----	0			
c -----	0			
d -----	0			
e -----	0			
f All other expenses	0			
25 Total functional expenses. Add lines 1 through 24f	103,681	103,540	141	0
26 Joint Costs. Check here ► <input type="checkbox"/> if 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				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	62,048	1	27,566
	2 Savings and temporary cash investments	37,178	2	37,263
	3 Pledges and grants receivable, net	0	3	0
	4 Accounts receivable, net	0	4	0
	5 Receivables from current and former officers, directors, trustees, key employees, or other related parties Complete Part II of Schedule L	0	5	0
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L	0	6	0
	7 Notes and loans receivable, net	0	7	0
	8 Inventories for sale or use	8		
	9 Prepaid expenses and deferred charges	9		
	10a Land, buildings, and equipment: cost basis	10a	0	
	b Less accumulated depreciation Complete Part VI of Schedule D	10b	0	0
	11 Investments—publicly traded securities	0	10c	0
	12 Investments—other securities See Part IV, line 11	0	11	0
	13 Investments—program-related See Part IV, line 11	0	12	0
	14 Intangible assets	0	13	0
	15 Other assets See Part IV, line 11	500	14	500
	16 Total assets. Add lines 1 through 15 (must equal line 34)	99,726	16	65,329
Liabilities	17 Accounts payable and accrued expenses	17		
	18 Grants payable	18		
	19 Deferred revenue	19		
	20 Tax-exempt bond liabilities	0	20	0
	21 Escrow account liability Complete Part IV of Schedule D	0	21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23 Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 Unsecured notes and loans payable	0	24	0
	25 Other liabilities Complete Part X of Schedule D	14,845	25	2,979
	26 Total liabilities. Add lines 17 through 25	14,845	26	2,979
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	27		
	28 Temporarily restricted net assets	28		
	29 Permanently restricted net assets	29		
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	30		
	31 Paid-in or capital surplus, or land, building, or equipment fund	31		
	32 Retained earnings, endowment, accumulated income, or other funds	84,881	32	62,350
	33 Total net assets or fund balances	84,881	33	62,350
	34 Total liabilities and net assets/fund balances	99,726	34	65,329

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a 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?

b If "Yes," did the organization undergo the required audit or audits?

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Public Charity Status and Public Support

2008

**Open to Public
Inspection**

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.

Name of the organization

CENTENNIAL HIGH SCHOOL FOUNDATION FOR THE FINE ARTS, INC.

Employer identification number

58-2328716

Part I Reason for Public Charity Status (All organizations must complete this part) (see instructions)

The organization is not a private foundation because it is (Please check only one organization.)

1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)
 4 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).
 7 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.)
 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
 9 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 Part III.)
 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions)
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III—Functionally integrated d Type III—Other
 e 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 organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (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?
 (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?
 h Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(I) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see Instructions))	(IV) Is the organization in col (I) listed in your governing document?	(V) Did you notify the organization in col (I) of your support?		(VI) Is the organization in col (I) organized in the U.S.?	(VII) Amount of support
				Yes	No		
							0
							0
							0
							0
							0
Total							0

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0	0	0			0
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
3 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0			0
4 Total Add lines 1-3	0	0	0	0	0	0
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						0

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4	0	0	0	0	0	0
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	0	0	0			0
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0	0	0			0
11 Total support. Add lines 7 through 10						0
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	0 00%
15 Public support percentage from 2007 Schedule A, Part IV-A, line 26f	15	0 00%
16a 33 1/3% support test-2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 33 1/3% support test-2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
17a 10%-facts-and-circumstances-test-2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 10%-facts-and-circumstances test-2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.	► <input type="checkbox"/>	
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	► <input type="checkbox"/>	

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	8,568	15,976	39,444	32,944	14,044	110,976
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	64,756	140,520	147,391	91,390	103,126	547,183
3 Gross receipts from activities that are not an unrelated trade or business under section 513						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 1-5	73,324	156,496	186,835	124,334	117,170	658,159
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						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
c Add lines 7a and 7b	0	0	0	0	0	0
8 Public support (Subtract line 7c from line 6.)						658,159

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	73,324	156,496	186,835	124,334	117,170	658,159
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	185	89	245	127	84	730
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c Add lines 10a and 10b	185	89	245	127	84	730
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						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.)						658,889
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	99.89%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99.87%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0.11%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	0.13%
19a 33 1/3% support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

Part IV

Supplemental Information. Complete this part to provide the explanation required by Part II, line 10,
Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

	PROGRAM SVC	MANAGEMENT	FUNDRAISING	Total:	0
1				1	
2 SUPPLIES	1448			2	
3 BANK CHARGES		141		3	
4 AWARDS	6324			4	
5 OTHER PROGRAM EXPENSES	58190			5	
6 CAPITAL ITEMS/MUSIC AND EQUIPEMENT	5085			6	
7 CLINICIANS, ACCOMPANISTS	10833			7	
8 FOOD FOR MEETINGS AND PARTIES	445			8	
9 UNIFORMS	12209			9	
10				10	
11 TOTAL	94534	141	-0-	11	
12				12	

► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

CENTENNIAL HIGH SCHOOL FOUNDATION FOR THE FINE ARTS, INC.

Employer Identification number
58-2328716

Part I- Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

<input checked="" type="checkbox"/> a Mail solicitations	<input type="checkbox"/> e <input checked="" type="checkbox"/> f <input type="checkbox"/> g <input checked="" type="checkbox"/> h <input type="checkbox"/> i <input type="checkbox"/> j <input type="checkbox"/> k <input type="checkbox"/> l <input type="checkbox"/> m <input type="checkbox"/> n <input type="checkbox"/> o <input type="checkbox"/> p <input type="checkbox"/> q <input type="checkbox"/> r <input type="checkbox"/> s <input type="checkbox"/> t <input type="checkbox"/> u <input type="checkbox"/> v <input type="checkbox"/> w <input type="checkbox"/> x <input type="checkbox"/> y <input type="checkbox"/> z	Solicitation of non-government grants
<input type="checkbox"/> b Email solicitations	<input type="checkbox"/> f <input checked="" type="checkbox"/> g <input type="checkbox"/> h <input type="checkbox"/> i <input type="checkbox"/> j <input type="checkbox"/> k <input type="checkbox"/> l <input type="checkbox"/> m <input type="checkbox"/> n <input type="checkbox"/> o <input type="checkbox"/> p <input type="checkbox"/> q <input type="checkbox"/> r <input type="checkbox"/> s <input type="checkbox"/> t <input type="checkbox"/> u <input type="checkbox"/> v <input type="checkbox"/> w <input type="checkbox"/> x <input type="checkbox"/> y <input type="checkbox"/> z	Solicitation of government grants
<input checked="" type="checkbox"/> c Phone solicitations	<input checked="" type="checkbox"/> g <input type="checkbox"/> h <input type="checkbox"/> i <input type="checkbox"/> j <input type="checkbox"/> k <input type="checkbox"/> l <input type="checkbox"/> m <input type="checkbox"/> n <input type="checkbox"/> o <input type="checkbox"/> p <input type="checkbox"/> q <input type="checkbox"/> r <input type="checkbox"/> s <input type="checkbox"/> t <input type="checkbox"/> u <input type="checkbox"/> v <input type="checkbox"/> w <input type="checkbox"/> x <input type="checkbox"/> y <input type="checkbox"/> z	Special fundraising events
<input checked="" type="checkbox"/> d In-person solicitations	<input type="checkbox"/> h <input type="checkbox"/> i <input type="checkbox"/> j <input type="checkbox"/> k <input type="checkbox"/> l <input type="checkbox"/> m <input type="checkbox"/> n <input type="checkbox"/> o <input type="checkbox"/> p <input type="checkbox"/> q <input type="checkbox"/> r <input type="checkbox"/> s <input type="checkbox"/> t <input type="checkbox"/> u <input type="checkbox"/> v <input type="checkbox"/> w <input type="checkbox"/> x <input type="checkbox"/> y <input type="checkbox"/> z	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

GA
500

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000

	(a) Event #1 <u>SCHOOL CONCES</u> (event type)	(b) Event #2 <u>IUTS GIFT BASKET</u> (event type)	(c) Other Events 7 (total number)	(d) Total Events (Add col (a) through col (c))
Revenue	1 Gross receipts	23,794	10,052	20,932 54,778
	2 Less Charitable contributions	0	0	0 0
	3 Gross revenue (line 1 minus line 2)	23,794	10,052	20,932 54,778
Direct Expenses	4 Cash prizes	0	0	0 0
	5 Non-cash prizes	0	0	0 0
	6 Rent/facility costs	0	0	0 0
	7 Other direct expenses	19,121	3,996	12,330 35,447
	8 Direct expense summary Add lines 4 through 7 in column (d)			► (35,447)
	9 Net income summary. Combine lines 3 and 8 in column (d)			► 19,331

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1 Gross revenue			0
Direct Expenses	2 Cash prizes			0
	3 Non-cash prizes			0
	4 Rent/facility costs			0
	5 Other direct expenses			0
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
	7 Direct expense summary Add lines 2 through 5 in column (d)			► (0)
	8 Net gaming income summary Combine lines 1 and 7 in column (d)			► 0

9 Enter the state(s) in which the organization operates gaming activities

a Is the organization licensed to operate gaming activities in each of these states?

b If "No," Explain

9a

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If "Yes," Explain

10a

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

11

12

13 Indicate the percentage of gaming activity operated in

- a The organization's facility
- b An outside facility

13a	%	Yes	No
13b	%		

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$
- c If "Yes," enter name and address:

Name ►

Address ►

16 Gaming manager information.

Name ►

Gaming manager compensation ► \$ 0

Description of services provided ►

 Director/officer Employee Independent contractor

17 Mandatory distributions

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
- b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

15a

17a

**Department of the Treasury
Internal Revenue Service**

Name of the organization

CENTENNIAL HIGH SCHOOL FOUNDATION FOR THE FINE ARTS, INC.

Employer Identification number

58-2328716

- 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.

PART VI, SECTION A, LINE 10, SECTION C, LINE 14.

THIS ORGANIZATION MAKES AVAILABLE ITS FINANCIAL STATEMENTS AND GOVERNING DOCUMENTS TO THOSE

INTERESTED PUBLIC PARTIES WHO MAKE A REQUEST TO THE EXECUTIVE DIRECTOR. THIS FORM 990 IS REVIEWED

BY THE CURRENT YEAR'S GOVERNING BOARD AT REGULARLY SCHEDULED PERIODIC FINANCIAL MEETINGS.

ALL MAJOR FINANCIAL DECISIONS RELATING TO ASSET ACQUISITION, FUNDRAISING PROGRAMS, SUPPORT

AMOUNTS PROVIDED, CONFLICT OF INTEREST POLICIES, AND MAJOR FUNDRAISING GOALS ARE REVIEWED

AND DISCUSSED AND APPROVED BY THE GOVERNING BOARD. FINANCIAL STATEMENTS ARE REVIEWED

AND COMPARED TO BUDGETS FOR SIMILAR ORGANIZATIONS TO ENSURE FINANCIAL COMPATIBILITY.

Part X, Line 15 (990) - Other Assets

500

500

	Description	Beginning	End
1	CONCESSION GIFT CARDS	500	500
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Part X, Line 25 (990) - Other Liabilities

14,845

2,979

	Description	Beginning	End
1	STUDENT ACCOUNT CREDITS	13,026	11,093
2	VENDOR ACCOUNTS	1,819	-8,114
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Part II (Sch G (990/990EZ)) - Events

Event Type	Line 1	Line 2 (Charitable contributions)	Line 3 (Gross Revenue (line 1 minus line 2))	Line 4 Cash Prizes	Line 5 Non-cash Prizes	Line 6 Rent/Facility costs	Line 7 Other direct expenses
1 AFTER SCHOOL CONCESSIONS	23,794		23,794				19,121
2 PEANUTS GIFT BASKET SALE	10,052		10,052				3,996
3 JAZZ CAFE	1,513		1,513				219
4 FRUIT SALES	5,243		5,243				4,353
5 DISCOUNT COUPON BOOKS	2,540		2,540				1,600
6 AWARDS BANQUET	3,716		3,716				1,457
7 FOOTBALL CONCESSIONS	4,971		4,971				2,324
8 THEATRE PRODUCTION	1,694		1,694				2,057
9 OTHER	1,255		1,255				320
10				0			
11				0			
12				0			
13				0			
14				0			
15				0			
16				0			
17				0			
18				0			
19				0			
20				0			

54,778 0 54,778 0 0 0 0 35,447