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# SCANNED JAN 2

(HTA)

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)

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

OMB No 1545-0047

Open to Public Inspection

Α	For th	e 2008 cal	endar ye	ar, or tax	year beginnır	ng	7/1/:	2008	, ar	nd en	iding		6/30/20	09			_
В	Check if a	pplicable	Please use IRS	C Name of	of organization	J L Bo	oren Eleme	ntary PTA				D Empl	oyer ident	ification num	ber		
	Address	change	label or	Doing E	Business As						7	75-2670	671				
	Name ch	nange	print or	Numbe	r and street (or I	O box if ma	all is not delive	red to street a	ddress)	Roo			hone numi	ber			_
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					7 Inverness		insfield, TX	76063			H(b) Are	all affiliate	es included	ls.	Yes[	^	Ю
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iles	4	Number	of indep	endent vo	oting membe	ers of the g	overning <b>k</b>	ophy (12614)	√2) linge21/1	910	\$5:00B		4				20
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_	11												47,314	1		39,28	_
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May	ay the IRS discuss this return with the preparer shown above? (see instructions)																

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

Form 990 (2008)

	art III Statement of Program Service Accomplishments (see instructions)		
1	Briefly describe the organization's mission		
	PTA provides various benefits, awards, equipment, and other amenities for approx 750 students and teach	ers at JL E	Boren Flemer
		<b></b>	
2	Did the organization undertake any significant program services during the year which were not listed on		
_	the prior Form 990 or 990-EZ?		es X No
	If "Yes," describe these new services on Schedule O	ш ''	es 🔼 110
3			
J	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Π,	
		Y	es X 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		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount	int of gran	ts and
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code ) (Expenses \$ 63,475 including grants of \$ 0 ) (Revenue \$		0)
	PTA provides various benefits, awards, equipment, and other amenities for approx 750 students and teach	ers at JL B	oren Elemer
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	•••••••••••••••••••••••••••••••••••••••		
44	Other program services (Describe in Schedule O)		
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4e	(Expenses \$ 0 including grants of \$ 0 ) (Revenue \$ Total program service expenses ► \$ 63,475 (Must equal Part IX. Line 25, column	<u>(B)</u>	
70	Total program service expenses 🚩 🖟 US,410 (IVIUS) Equal Fall IX, LINE 25, COMININ	(0) /	

J L Boren Elementary PTA

Checklist of Required Schedules Part-IV

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		X
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	5		
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	6		×
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	7		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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? <i>If "Yes,"</i> complete Schedule D, Part IV	9		х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		$\frac{\hat{x}}{x}$
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, IX, or X as applicable	11		<u>^</u>
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
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	,		
15	business, 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	14b		Х
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
	•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	16		Х
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17	X	
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		_X_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		_X_
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	21		X
22 23	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete  Schedule J	22		<u> </u>
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		_X_
_70	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions		ŀ	
	24b–24d and complete Schedule K. If "No," go to question 25	24a		¥
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a		<u> </u>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
А	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	240		
	disqualified person during the year? If "Yes," complete Schedule L, Part I  Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified	25a	_	_X_
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X
	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		х
		Form	990 (	2008)

# Form 990 (2008) J L Boren Elementary PTA Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	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		Х
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		Х
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		Х
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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i>	33		Х
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		Х
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		Х
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		Х
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		Х
-		Eorm	aan	/2000

Pas	t V Statements Regarding Other IRS Filings and Tax Compliance				<u> </u>
				Yes	No
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	0			1
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b	0			1
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portable			1
	gaming (gambling) winnings to prize winners?		1c		
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				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuin	ns?	2b		
	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 covere	d by			
	this return?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial			
	account)?		4a		_X
b	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	3ank			
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	1	5a		_X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			ŀ	
	Regarding Prohibited Tax Shelter Transaction?	].	5c		
6a	Did the organization solicit any contributions that were not tax deductible?		6a		_X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or		1	
	gifts were not tax deductible?	]	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than	_		
	\$75?	-	7a		<u>X</u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	-	7b		Х
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was a self-to-file for a 20000	S	_		
	required to file Form 8282?	,	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year  7d			-	
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p benefit contract?	ersonai	7.	ŀ	v
ε			7e		<u>X</u>
٦	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7f		<del>^</del>
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		7 <u>g</u>		
"	required?	as	7h		Х
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and se	ction			
•	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spoi	i i	Í		
	organization, have excess business holdings at any time during the year?	looring	8	1	Х
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	ř			<del></del>
а	Did the organization make any taxable distributions under section 4966?		9a	1	_x
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		X
10	Section 501(c)(7) organizations. Enter		-		
а	Initiation fees and capital contributions included on Part VIII, line 12				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		ļ		
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders				
b	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?	12a		_X_
<u>b</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b				

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 20			
b	Enter the number of voting members that are independent 1b 20			
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		Х
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	-	Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following		ĺ	
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	х	
1	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		Χ
Sect	tion B. Policies			
			Yes	No
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		Х
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c		X
3	Does the organization have a written whistleblower policy?	13		X
4	Does the organization have a written document retention and destruction policy?	14		X
5	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	Ì		
а	The organization's CEO, Executive Director, or top management official?	15a		<u> </u>
b	Other officers or key employees of the organization?	15b		Х
	Describe the process in Schedule O (see instructions)		-	
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		-	
	with a taxable entity during the year?	16a		_X_
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	ŀ		
	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?	16b		_X_
	ion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed			
8	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s o	nly)		
	available for public inspection. Indicate how you make these available. Check all that apply			
Δ.	Own website Another's website X Upon request			
9	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interespondent available to the public	:st		
n	policy, and financial statements available to the public.			
0	State the name, physical address, and telephone number of the person who possesses the books and records of the organization Dominique Kobe (817) 739-03			
	organization ► Dominique Kobe (817) 739-03  1313 Clover Hill, Mansfield, TX 76063	ου		·

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

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

- 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 (C) (E) (F) (A) (B) (D) Position (check all that apply) Name and Title Reportable Reportable Estimated Average 요되되어진으되고 compensation amount of compensation hours per

	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Courtney Wilson President	10							0	0	0
Angle Thor 1st VP	10							0	0	0
Kathı Stevenson 2nd VP	5							0	0	0
Jenny Cook 3rd VP	5							0	0	0
Kelly Kerr 4th VP	5							0	0	0
Terri Mount 5th VP	5							0	0	0
Shelly Ackroyd Secretary	10							0	0	0
Dominique Kobe Treasurer	10							0	0	. 0
Becky Trammel Historian	5							0	0	0
Amanda Smith Parliamentarian	5	,				_		0	.0	0
	0							0	0	0
	0							0	0	0
	0							0	0	0
	0				_			0	0	0
	0		L					0	0	0
	0							0	0	0
	0							0	0	0

LE	rt VII Section A. Officers, Directors, Tru (A)	(B)	ipio,	CCS		C)	Jiles		(D)	(E)	lueu)	(F)	
	Name and title	Average	Po	sition	•	•	hat ap	ply)	Reportable	Reportable	.	ر بر Estimate	ď
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	col	other other mpensate from the reganization delate ganization ganization delate ganiz	of tion e on ed
		. 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	C			0
		0							0				0
		0							0	С			0
		0							0	C	-		0
46	T-1-1	0							0	0	_		0
1b 2	Total Total number of individuals (including those	ın 1a) who roos	d	mor	- 4h-	- C1	100.0	) ) )	0	C			0
_	organization • 0	iii ia) wilo rece	iveu	HOI	e li ia	шф	100,0	ioo ii	r reportable con	ipensation from	ııne		
			_						<del></del>		T	/es	No
3	Did the organization list any <b>former</b> officer, of employee on line 1a? <i>If</i> "Yes," complete Sch					yee,	or h	ighes	st compensated	<b>I</b>	3		х
4	For any individual listed on line 1a, is the sur the organization and related organizations g individual	m of reportable reater than \$15	com <sub>(</sub> 0,000	pens )? <i>If</i>	atıor "Yes	n and S, " Co	d oth	er co ete S	ompensation fro Schedule 'J for si	ıch	4		x
5	Did any person listed on line 1a receive or a services rendered to the organization? If "Yes	ccrue compens	ation	fron	n any	/ uni	relate	ed or	ganization for				
Sec	tion B. Independent Contractors	ss, complete st	JIIEU	uie J	101 8	Suci	pers	SULL	· · · · · · · · · · · · · · · · · · ·		5		<u>X</u>
1	Complete this table for your five highest com- compensation from the organization	pensated indep	end	ent c	ontra	acto	rs tha	at red	ceived more that	n \$100,000 of			
	(A) Name and business ac	ddress							(B) Description of serv	ices	(C Compe	c) nsation	
													0
													0
						_							0
					_	-							0 0
2	Total number of independent contractors (incompensation from the organization ►	cluding those in	1) w	ho r	eceiv	/ed i	more	thar	\$100,000 in				

Par	t 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
ats	1a	Federated campaigns	1	a	0				
ja ja	ь	Membership dues	1	b	1,803	Ì			
S, Ç	С	Fundraising events	_1	c	0				
gift	d	Related organizations	1	d	0		:		
S, E	е	Government grants (contributions)	1	е	0				
tior	f	All other contributions, gifts, grants	, and						
ğ g		similar amounts not included above	e [1	lf	54_				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in I	lines 1a-1	f \$	0				
<u>2</u> <u>F</u>	h	Total. Add lines 1a-1f				1,857			
e e					Business Code				
ven	2a				<del> </del>			<u> </u>	
ď	b					0			
<u>č</u>	C					. 0			
Se	d					0			
Ē	e					0			
Program Service Revenue	f	All other program service revenue				0			
	g	Total. Add lines 2a-2f			<u> </u>	0			
	3	Investment income (including divide	ends, inte	rest, an	d	٠_			
		other similar amounts)				°0			
	4	Income from investment of tax-exer	mpt bond	procee	ds <b>&gt;</b>	0			
	5	Royalties	- 45		<u> </u>	0			
	١.	0 0 1	(i) Re	eal	(II) Personal				
	6a	Gross Rents							
	b	Less rental expenses			0				
	C	Rental income or (loss)		0	0	· <sub>0</sub>			
	d 70	Net rental income or (loss) Gross amount from sales of	(ı) Secu	irition	(II) Other				
	7a		(1) 3600	0	(ii) Other				:
	b	assets other than inventory Less cost or other basis			U				
	, D			0	o				
	С	and sales expenses Gain or (loss)		0	0				
	d	Net gain or (loss)			▶	0			
	8a	Gross income from fundraising				<u> </u>			
<u>n</u> e	, Ju	events (not including \$	n						
/eu		of contributions reported on line 1c)							
Ş.		See Part IV, line 18 .	,	а	84,759				
e	b	Less direct expenses		b	45,478				
Other Revenue		Net income or (loss) from fundraisir	ng events		<b>&gt;</b>	39,281			
	9a	Gross income from gaming activitie	es						
		See Part IV, line 19		а	0				
	b	Less direct expenses		b	0				
	С	Net income or (loss) from gaming a	activities		<b>&gt;</b>	0			
	10a	Gross sales of inventory, less							
	İ	returns and allowances		а	0				
	•	Less cost of goods sold		b	0				
	<u> </u>	Net income or (loss) from sales of i	nventory		<u> </u>	0			
		Miscellaneous Revenue	-	-	Business Code				
	11a					0			
	b					0			
	C	All sales and a second	· •			0			<u> </u>
	d	All other revenue				0			
	12	Total Payonus Add lines 1h 2g 3	) A E 6-1	74 0-	<b>&gt;</b>	0			
	12	<b>Total Revenue.</b> Add lines 1h, 2g, 3 9c, 10c, and 11e.	), 4, 5, 6d,	, /u, 6C,	•	41,138	0	0	,
		55, 100, unu 116 .				, <del>,</del> , , , , , , ,	U	, ,	

### 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 req	uired to complete	columns (B), (C), a	nd (D).
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S See Part IV, line 21	o			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	12,893	12,893	1	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	o			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,				
	trustees, and key employees	o			•
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
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)				
а	Management	ol			
b	Legal	0			
С	Accounting	275		275	
đ	Lobbying	0		,	
е	Professional fundraising services See Part IV, line 17 [	0			
f	Investment management fees .	0			
g	Other	0			
12	Advertising and promotion	1,153		1,153	
13	Office expenses	677		677	
14	Information technology	0			
15	Royalties	0			•
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	1,376	1,376		
20	Interest	0			
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	859	859		
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together	1			
	and labeled miscellaneous may not exceed	]			
	5% of total expenses shown on line 25 below )	7.0-0			
a	Awards & Recognition	7,353	7,353		<u> </u>
b	Field Trips	2,521	2,521		
ر د	Programs	35,657	35,657		
d	Beautification	1,256 1,280	1,256 1,280		-
e f	Family Appreciation & Fellowship All other expenses Dues	280	1,280		
25	Total functional expenses. Add lines 1 through 24f	65,580	63,475	2,105	
	Joint Costs. Check here ▶ If following	33,300	00,470	2,100	
26	SOP 98-2 Complete this line only if the organization	,			
	reported in column (B) joint costs from a combined	}			
	educational campaign and fundraising				
	solicitation				
	, concinción	_	. <u>_</u>		

	ait V	Balance Sheet	(A) Beginning of year			B) of year
	1	Cash-non-interest-bearing .	43,762	1		19,018
	2	Savings and temporary cash investments		2		
	3	Pledges and grants receivable, net	0	3		C
	4	Accounts receivable, net	0			C
	5	Receivables from current and former officers, directors, trustees, key	<del> ·</del>			
		employees, or other related parties Complete Part II of Schedule L	0	5		C
	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			0
w	١ ـ	<b>†</b>	0			0
set	7	Notes and loans receivable, net	0			0
Assets	8	Inventories for sale or use		8		
•	9	Prepaid expenses and deferred charges		9		
	10a					
	k	' '				_
		Part VI of Schedule D 0	0			0
	11	Investments-publicly traded securities	0	11		0
	12	Investments–other securities See Part IV, line 11	0	12		0
	13	Investments-program-related See Part IV, line 11	0	13		0
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11	0	15		0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	43,762	16		19,018
	17	Accounts payable and accrued expenses		17	l	
	18	Grants payable		18		
	19	Deferred revenue		19		
Liabilities	20	Tax-exempt bond liabilities	0	20		0
	21	Escrow account liability Complete Part IV of Schedule D		21		
	22	Payables to current and former officers, directors, trustees, key				
		employees, highest compensated employees, and disqualified			l	
Ë		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	0	25		
	26	Total liabilities. Add lines 17 through 25	0	26		0
					<u> </u>	
S		Organizations that follow SFAS 117, check here ► X and				
ŭ		complete lines 27 through 29, and lines 33 and 34.	===			
<u> </u>	27	Unrestricted net assets	43,762	27		19,018
8	28	Temporarily restricted net assets		28		
u	29	Permanently restricted net assets		29		
or Fund Balance		Organizations that do not follow SFAS 117, check here▶				
ō		and complete lines 30 through 34.				
Net Assets	30	Capital stock or trust principal, or current funds	·	30		
SS	31	Paid-in or capital surplus, or land, building, or equipment fund		31		
۲	32	Retained earnings, endowment, accumulated income, or other funds		32		
Ne	33	Total net assets or fund balances	43,762	33		19,018
	34	Total liabilities and net assets/fund balances	43,762	34		19,018
Pa	rt XI		10,1,92			
						Yes No
1	Α	ccounting method used to prepare the Form 990 X Cash Accru	al Uther			
2		Vere the organization's financial statements compiled or reviewed by an indep			_2a_	X
ı	b V	Vere the organization's financial statements audited by an independent accou	ıntant?		2b	X
(	c If	"Yes" to lines 2a or 2b, does the organization have a committee that assume	es responsibility for overs	ight of	fthe	
		udit, review, or compilation of its financial statements and selection of an inde			2c	
3	a A	s a result of a federal award, was the organization required to undergo an au-	dit or audits as set forth i	n		
		ne Single Audit Act and OMB Circular A-133?			_3a	X
	o If	"Yes," did the organization undergo the required audit or audits?			3b	

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

# **Public Charity Status and Public Support**

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

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Open to Public Inspection

OMB No 1545-0047

Name	of the	organization							Employe	r identificat	tion numb	er	
		Elementary		<u> </u>					75-2670				
Par	_	·		harity Status (All or					rt ) (see	instructio	ons)		
	rgar		•	ation because it is (P		•	-			.,			
1	님			rches, or association			ea in <b>se</b> a	tion 1/0	(D)(1)(A)(	1).			
2	닏			on 170(b)(1)(A)(ii). (A		•							
3	닏			nospital service organi								-	
4			esearch organiza ame, city, and st	ation operated in conjuate	unction wi	th a hosp	ıtal descri	bed in se	ction 170	)(b)(1)(A) 	(iii). En	ter the	
5				r the benefit of a colleg (Complete Part II)	ge or univ	ersity ow	ned or op	erated by	a govern	mental ui	nit desci	ribed	
6		A federal, st	ate, or local gov	ernment or governme	ntal unit d	described	ın <b>sectio</b> ı	n 170(b)(	1)(A)(v).				
7				y receives a substanti (1)(A)(vi). (Complete		ıts suppo	rt from a (	governme	ental unit o	or from th	e gener	ai publ	IC
8		A communit	y trust described	in section 170(b)(1)	( <b>A</b> )(vi). (C	Complete I	Part II)						
9	X					-	•	om contri	butions, n	nembersh	nip fees.	and q	ross
		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 organiza	tion organized a	nd operated exclusive	ly to test	for public	safety S	ee <b>sectio</b>	n 509(a)(	<b>4).</b> (see ıı	nstructio	ns)	
11 e		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  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 organiz	, , ,	a written determinatioi	n from the	RS that	ıt ıs a Typ	e I, Type	II, or Typ	e III supp	orting		
g		_	st 17, 2006, has	the organization acce	pted any	gift or cor	itribution (	from any	of the				
				or indirectly controls,		-		persons	described	ın (II)		Yes	No
				verning body of the su		rganizatio	ou <sub>o</sub>				11g(ı)		_
			•	person described in (i	•	. () = = =	. 0				11g(ii)		
h				y of a person describe ation about the organi				norte			11g(iii)		
		of supported	(II) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(IV) Is the o	organization sted in your document?	(v) Did y the organ col.(i)	ou notify nization in of your port?	organizat (i) organi	Is the tion in col zed in the S ?		Amount support	of
					Yes	No	Yes	No	Yes	No	1		
													0
													0
											-	<del></del> -	0
		·····											0
Total	•												0

Schedule A (Form 990 or 990-EZ) 2008 J L Boren Elementary PTA 75-2670671 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2,542 3,512 3,596 1,803 2,146 13,599 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf n 0 0 0 3 The value of services or facilities furnished by a governmental unit to the organization without charge 0 Total Add lines 1-3 2,542 3,512 3.596 2,146 1,803 13,599 4 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) Public support. Subtract line 5 from line 4 13,599 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2004 (b) 2005 (d) 2007 (c) 2006(e) 2008 (f) Total 7 Amounts from line 4 2,542 3,512 3,596 2,146 1,803 13,599 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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) Total support. Add lines 7 through 10 11 13,599 Gross receipts from related activities, etc. (see instructions.) 12 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 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 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 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 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  $10\overline{\%}$ 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

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

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### Schedule A (Form 990 or 990-EZ) 2008 J L Boren Elementary PTA 75-2670671 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (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 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2,542 3.596 3,512 9,650 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 127,912 114,913 104.953 347,778 3 Gross receipts from activities that are not an unrelated trade or business under section 513. 0 Tax revenues levied for the organization's benefit and either paid to or expended on n 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge 130,454 118,425 108.549 0 357,428 Total, Add lines 1-5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 0 0 0 0 0 0 Add lines 7a and 7b Public support (Subtract line 7c from 357,428 line 6) Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (e) 2008 (a) 2004 (b) 2005 (c) 2006 (d) 2007 (f) Total Amounts from line 6 130.454 118,425 108.549 0 357,428 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 0 Add lines 10a and 10b 0 0 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 13 Total support. (Add lines 9, 10c, 11, and 12) 357,428 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 ightharpoonsSection C. Computation of Public Support Percentage Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) 15 100 00% Public support percentage from 2007 Schedule A, Part IV-A, line 27g 16 100 00% 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 00% 18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h 18 0 00% 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 **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

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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Schedule AtTom 990 or 990-E22 2009 J. L. Boren Elementary PTA 75-2670671 Par Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10. Part III, line 17 or 17b, or Part III. line 12. Provide any other additional information. (see instructions)	age <b>4</b>
	<b>-</b>
	<b></b>
	<b>-</b> -
	- <b></b> -

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

**Supplemental Information Regarding** Fundraising or Gaming Activities

► Attach to Form 990 or Form 990-EZ Must be completed by organizations that answer "Yes" to Form 990, Part IV,

OMB No 1545-0047

Inspection

Department of the Treasury lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a Internat Revenue Service Employer identification number Name of the organization 75-2670671 J L Boren Elementary PTA Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Indicate whether the organization raised funds through any of the following activities. Check all that apply Solicitation of non-government grants Mail solicitations Solicitation of government grants Email solicitations b Phone solicitations Special fundraising events С d In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees 2a or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
				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
				0	0	0
Total			<b>&gt;</b>	0	0	0
3 List all states in which the organization	ation is registered	d or license	ed to solicit	funds or has been	notified it is exemi	ot from

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
	•••••••••••••••••••••••••••••••••••••••
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formed to administer charitable gaming?

Schedule G (Form 990 or 990-EZ) 2008 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported Part II more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (a) Event #1 (b) Event #2 (c) Other Events (d) Total Events Book Fair & Dinner (Add col (a) through Carnival & Auction 11 col (c)) (event type) (total number) (event type) 1 Gross receipts 18,000 24,790 41.969 84.759 Less Charitable contributions 0 3 Gross revenue (line 1 minus line 2) 18,000 24.790 41,969 84,759 Cash prizes 0 0 0 Direct Expenses Non-cash prizes 0 0 0 6 Rent/facility costs 0 0 0 7 Other direct expenses 13,299 7,639 24,540 45,478 8 Direct expense summary Add lines 4 through 7 in column (d) 45.478) Net income summary Combine lines 3 and 8 in column (d) 39.281 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 Revenue (a) Bingo (b) Pull tabs/Instant (c) Other gaming (d) Total gaming (Add bingo/progressive bingo col (a) through col (c)) 1 Gross revenue 0 2 Cash prizes Direct Expenses 0 3 Non-cash prizes 0 4 Rent/facility costs 5 Other direct expenses Yes % Yes Yes 6 Volunteer labor 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) Yes No 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? 9a b If "No," Explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," Explain Does the organization operate gaming activities with nonmembers? 11 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity

retain the state gaming license?

in the organization's own exempt activities during the tax year ▶\$

Schedule G (Form 990 or 990-EZ) 2008 Page 3 Ye<u>s</u> No Indicate the percentage of gaming activity operated in a The organization's facility 13a % b An outside facility Provide the name and address of the person who prepares the organization's gaming/special events books 14 and records Name ▶ Address ▶ 15a Does the organization have a contract with a third party from whom the organization receives gaming 15a 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 ► Gaming manager information Name ▶ Gaming manager compensation ► \$ 0 Description of services provided -----Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent

Schedule G (Form 990 or 990-EZ) 2008

17a

Part VIII, Lines 1a-h (990) - Contributions, Gifts, Grants, and Other Amounts

•	Cash	Non Cash
1 Federated Campaigns		1
2 Membership dues	1,803	2
3 Fundraising events		3
4 Related organizations		4
5 Government grants (contributions)		5
6 All other contributions, gifts, grants, and similar amounts not included above		
Donations	54	
`	<del></del>	<del> </del>
Other contributions total	54	6 0
7 Total	1,857	7 0

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Part II (Sch G (990/990EZ)) - Events	84,759	0	84,759	0	0	0	45,478
	Line 1	Line 2	Line 3	Line 4	Line 5	Line 6	Line 7
		Less	Gross Revenue				
		(Charitable	(line 1 minus		Non-cash	Rent/Facility	Other direct
Event Type	Gross Receipts	contributions)	line 2)	Cash Prizes	Prizes	costs	expenses
1 Book Fair & Dinner	18,000		18,000				13.299
2 Carnival & Auction	24,790		24,790			1	7.639
3 Field Day Concessions	2,294		2,294		: :		2.038
4 Passbooks	9,126		9,126	:			259
5 Back to School Dinner	847		847		! !		1.562
6 Bears Book Club	1,300		1,300		1	1	1.073
7 Spirit Wear	10,247		10,247				9.706
8 Spirit Night	896		896			1	0
9 Newsletter	2,040		2,040				790
10 Yearbook	8,403		8,403				7.738
11 Dad's Club	2,450		2,450				463
12 Directory	1,206		1,206				009
13 Corporate Brands	3,088		3,088				311
14			0				
15			0				!!!!
16			0				
- 17			0		!		:
18			0				:
19			0			; ; ;	i
20			0				