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Form **990-EZ**

**Short Form
Return of Organization Exempt From Income Tax**

OMB No 1545 1150

2008

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)
Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

Open to Public Inspection

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

A For the 2008 calendar year, or tax year beginning 7/01, 2008, and ending 6/30, 2009

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Please use IRS label or print or type. See Specific Instructions. PTA CALIFORNIA CONGRESS OF PARENTS/ HUFF ELEMENTARY SCHOOL PTA 253 MARTENS AVENUE MOUNTAIN VIEW, CA 94040-3220	D Employer identification number 77-0492242
		E Telephone number (650) 526-3490
		F Group Exemption Number
		G Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

I Website: WWW.HUFFPTA.COM

J Organization type (check only one) — 501(c) (3) (insert no) 4947(a)(1) or 527

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ \$ 86,172.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

REVENUE	1 Contributions, gifts, grants, and similar amounts received	1	31,614.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	3,880.
	4 Investment income	4	378.
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a) (att sch)	5c	
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	45,555.
	b Less direct expenses other than fundraising expenses	6b	15,474.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	30,081.	
7a Gross sales of inventory, less returns and allowances	7a	4,745.	
b Less cost of goods sold	7b	2,853.	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1,892.	
8 Other revenue (describe _____)	8		
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	67,845.	
EXPENSES	10 Grants and similar amounts paid (attach schedule) SEE STATEMENT 1	10	105,046.
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	
	13 Professional fees and other payments to independent contractors	13	
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	2,000.
	16 Other expenses (describe SEE STATEMENT 2)	16	8,632.
	17 Total expenses (add lines 10 through 16)	17	115,678.
	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-47,833.
	ASSETS	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19
20 Other changes in net assets or fund balances (attach explanation)		20	
21 Net assets or fund balances at end of year Combine lines 18 through 20		21	27,602.

Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	75,435.	27,602.
23 Land and buildings		
24 Other assets (describe _____)		
25 Total assets	75,435.	27,602.
26 Total liabilities (describe _____)	0.	0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	75,435.	27,602.

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

Form 990-EZ (2008)

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Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51. SEE STATEMENT 5

	Yes	No
46 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		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	X	
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If 'Yes,' was the related organization(s) a section 527 organization?		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
NONE		
Total number of other independent contractors receiving over \$100,000		

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.

Sign Here

Signature of officer: *[Handwritten Signature]* Date: 1/15/2010
 Type or print name and title: Lisa Chen (PTA Treasurer)

Paid Preparer's Use Only

Preparer's signature: *[Handwritten Signature]* Date: 12/17/09
 Firm's name (or yours if self-employed), address, and ZIP + 4: MOHLER NIXON & WILLIAMS ACCOUNTANCY CORP., 635 CAMPBELL TECHNOLOGY PARKWAY, CAMPBELL, CA 95008-5059
 Check if self-employed: Preparer's Identifying Number (See instructions): N/A
 EIN: N/A
 Phone no: (408) 369-2400

May the IRS discuss this return with the preparer shown above? See instructions Yes No

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545 0047

2008

Open to Public Inspection

Name of the organization **PTA CALIFORNIA CONGRESS OF PARENTS/ HUFF ELEMENTARY SCHOOL PTA** Employer identification number **77-0492242**

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 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 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 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?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		
(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.

(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	Yes	No	Yes	No	
Total									

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 'unusual grants')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4 Total. Add lines 1-3						
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						

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						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
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	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	%
16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the 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"/>		

BAA

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 yr 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 "unusual grants.")	35,670.	42,805.	54,164.	48,807.	35,494.	216,940.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	56,916.	59,117.	67,268.	72,472.	50,300.	306,073.
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.
5 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6 Total. Add lines 1-5	92,586.	101,922.	121,432.	121,279.	85,794.	523,013.
7a Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
8 Public support (Subtract line 7c from line 6)						523,013.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	92,586.	101,922.	121,432.	121,279.	85,794.	523,013.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	980.	1,523.	1,806.	2,118.	378.	6,805.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0.
c Add lines 10a and 10b	980.	1,523.	1,806.	2,118.	378.	6,805.
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.
13 Total support. (add lns 9, 10c, 11, and 12.)						529,818.

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	98.7%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	98.8%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	1.3%
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	1.2%

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 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.

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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

2008

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury
Internal Revenue Service

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III.

Name of organization PTA CALIFORNIA CONGRESS OF PARENTS/ HUFF	Employer identification number 77-0492242
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Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.
See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

Part I-B To be completed by all organizations exempt under section 501(c)(3).
See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
b If 'Yes,' describe in Part IV

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).
See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures – (The term 'expenditures' means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to influence public opinion (grass roots lobbying)			
b Total lobbying expenditures to influence a legislative body (direct lobbying)			
c Total lobbying expenditures (add lines 1a and 1b)		0.	0.
d Other exempt purpose expenditures		115,678.	
e Total exempt purpose expenditures (add lines 1c and 1d)		115,678.	0.
f Lobbying nontaxable amount Enter the amount from the following table in both columns		23,136.	
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000. Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000			
g Grassroots nontaxable amount (enter 25% of line 1f)		5,784.	0.
h Subtract line 1g from line 1a. Enter -0- if line g is more than line a		0.	0.
i Subtract line 1f from line 1c Enter -0- if line f is more than line c		0.	0.
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount	13,226.	15,337.	16,150.	23,136.	67,849.
b Lobbying ceiling amount (150% of line 2a, column (e))					101,774.
c Total lobbying expenditures			1,500.		1,500.
d Grassroots non-taxable amount	3,317.	3,834.	4,038.	5,784.	16,973.
e Grassroots ceiling amount (150% of line 2d, column (e))					25,460.
f Grassroots lobbying expenditures			1,500.		1,500.

BAA

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, question 3 is answered 'Yes.' See Schedule C Instructions for details.

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4).	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Part IV Supplemental Information *(continued)*

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	(b) Event #2	(c) Other Events	(d) Total Events	
		SILENT AUCTION (event type)	BOOK FAIR (event type)	(total number)	(Add col. (a) through col. (c))	
REVENUE	1	Gross receipts	37,701.	7,854.	45,555.	
	2	Less Charitable contributions				
	3	Gross revenue (line 1 minus line 2)	37,701.	7,854.	45,555.	
DIRECT EXPENSES	4	Cash prizes				
	5	Non-cash prizes		165.	165.	
	6	Rent/facility costs	5,484.		5,484.	
	7	Other direct expenses	5,768.	4,057.	9,825.	
	8	Direct expense summary. Add lines 4- through 7 in column (d)				15,474.
	9	Net income summary. Combine lines 3 and 8 in column (d)				30,081.

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				
	DIRECT EXPENSES	2	Cash prizes			
		3	Non-cash prizes			
		4	Rent/facility costs			
		5	Other direct expenses			
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)					
8	Net gaming income summary. Combine lines 1 and 7 in column (d)					

	YES	NO
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 _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?		
b If 'Yes,' Explain _____		
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?		

13 Indicate the percentage of gaming activity operated in.

- a The organization's facility 13a %
- b An outside facility 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 contact 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 ▶ \$ _____
 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 ▶ \$ _____

	YES	NO
13a		
13b		
14		
15a		
16		
17a		
17b		

2008 990 Form Statements and Schedules

990 Part 1 Revenue and Expenses

Line 6 Special Events and Activities

Events	Gross Receipts	Amount as Contributions	Gross Revenue	Direct Expenses	Net Income
Silent Auction	\$ 37,701.00	\$ -	\$ 37,701 00	\$ 11,253 00	\$ 26,448 00
Book Fair	\$ 7,854 00	\$ -	\$ 7,854 00	\$ 4,222 00	\$ 3,632 00
<i>Totals</i>	\$ 45,555.00	\$ -	\$ 45,555 00	\$ 15,475 00	\$ 30,080.00
<i>reports on 990 to:</i>	none	line 6a,1a	line 6a	line 6b	line 6c

Line 7 Sales of Inventory

Sales	Gross Receipts	Product Cost	Gross Profit
Dough-to-Go (frozen cookie dough)	\$ 4,740 00	\$ 2,853.00	\$ 1,887.00
Huff Wear (school logo clothing)	\$ 5.00	\$ -	\$ 5 00
<i>Totals:</i>	\$ 4,745 00	\$ 2,853 00	\$ 1,892 00
<i>reports on 990 to:</i>	7a	7b	7c

STATEMENT 1
FORM 990-EZ, PART I, LINE 10
GRANTS AND SIMILAR AMOUNTS PAID

DONEE'S NAME: SEE ATTACHED STATEMENT
CASH AMOUNT GIVEN: \$ 103,579.

PAYMENTS TO AFFILIATES

NAME: DUES PAID TO PTA COUNCIL
ADDRESS: 541 N FAIRBANKS COURT #1300
CHICAGO, IL 60611
PURPOSE OF PAYMENT: AMOUNT OWED TO PARENT ORG.
AMOUNT: \$ 1,467.

STATEMENT 2
FORM 990-EZ, PART I, LINE 16
OTHER EXPENSES

CONFERENCES, CONVENTIONS, AND MEETINGS	\$ 2,823.
EQUIPMENT RENTAIL	859.
OTHER EXPENSES	71.
PTA GENERAL MEMBERSHIP PROMO	622.
SUPPLIES	1,546.
TAX PREPARATION FEE	950.
TRANSLATION	365.
WEBSITE DEVELOPMENT	1,396.
TOTAL	<u>\$ 8,632.</u>

STATEMENT 3
FORM 990-EZ, PART III
ORGANIZATION'S PRIMARY EXEMPT PURPOSE

MEMBER DUES HELP SUPPORT THE PROGRAMS OF THE PTA AND ALLOW FOR PARENTS TO GET INVOLVED IN THEIR CHILDREN'S EDUCATION.

STATEMENT 4
FORM 990-EZ, PART III, LINE 31
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

DESCRIPTION	0. GRANTS	PROGRAM SERVICE EXPENSES
SEE ATTACHED SCHEDULE		103,579.
INCLUDES FOREIGN GRANTS: NO		
TOTAL	<u>\$ 0.</u>	<u>\$ 103,579.</u>

**STATEMENT 5
FORM 990-EZ, PART VI
REGARDING TRANSFERS ASSOCIATED WITH PERSONAL BENEFIT CONTRACTS**

(A) DID THE ORGANIZATION, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY OR
INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT? . . .

NO

(B) DID THE ORGANIZATION, DURING THE YEAR, PAY PREMIUMS, DIRECTLY OR
INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT? . . .

NO

990 Part III Statement of Program Service Accomplishments

Part III Line 28

Classroom Reimbursement. This program reimburses teachers for supplemental classroom materials. This allows teachers to provide materials for art, crafts, science experiments, classroom books, charts, maps, etc. This provides a richer experience for students, and helps attract better teachers. All teachers and students benefit (about 440 students).

\$ 13,183 00

Part III Line 29

Music & Arts. These programs provides money for additional art and sessions of music instruction. It also provides an after school Honor Choir program. All students benefit.

Music - Supplement & Chorus	\$	6,330 00
Kinder - Art in Action	\$	2,778 00
	\$	<u>9,108 00</u>

Part III Line 30

Fieldtrips. This program provided funding for field trips for students. This provides hands on learning experiences for students. All students benefited.

\$7,919.00

Part III Line 31 - Other program services

Classroom Magazines/Newspapers. Grants funding to each classroom to purchase either a magazine or newspaper subscription such as "Time for Kids" or "Weekly Reader". Magazines and Newspapers allow teachers to incorporate current events into lessons. Benefits all students.

\$ 1,946 00

Science Camp. This program provides funding for a one week science camp for 5th graders. Program benefits all 5th graders.

\$ 1,872 00

Library Program.

Funding is provided for school library books, library operational expenses, lunchtime enrichment, and storytime. All students benefited.

\$ 6,754 00

Educational Enrichment Programs. Supports a number of educational programs such as school assemblies, environmental education, and family education nights
Benefits all students (about 425 students).

Assemblies	\$	2,450 00
Environmental Education	\$	3,810 00
Family Education Nights	\$	1,074.00
	\$	<u>7,334.00</u>

Community Building Programs. Supports a number of community building social programs such as the school carnival (Hawkfest), cultural diversity events, and a summer social.
All students benefited (about 425 students)

Hawkfest	\$	3,656 00
Cultural diversity events	\$	790 00
Summer & Kindergarten social	\$	454.00
	\$	<u>4,900.00</u>

Activities Indirectly Benefiting Huff Children Supports a number of programs which indirectly benefit all students such as maintenance of school grounds (Beautification Day), sunshades (health & safety), garden, staff appreciation (help retain teachers), parent education (help parents), and student directory
All students benefited (about 425 students)

Beautification Day	\$	317 00
Heath & Safety	\$	448.00
Huff Garden	\$	1,713 00
Parent Education	\$	900.00
Staff Appreciation	\$	717.00
	\$	<u>4,095 00</u>

School Funding Requests for 2005-2006. Grants funding to school for requested materials This year desks, headphones, projectors, docu-cams, and sounds system were purchased
All students benefited (about 425 students)

\$ 44,327 00

Grants to Council and National PTA. Grants to parent organization for scholarship funds and other programs

\$ 655 00

Scholarships to after school programs Grants to students for fee based after school programs to allow any interested student to participate in the enrichment program

\$ 1,171 00

Family Support Fund Grants to families in need of financial support

\$ 315 00

Part III f. Total of Program Service Expenses

\$ 103,579.00

Part IV Officers, Directors, Trustees, and Key Employees

Name and Address	Title & Avg Hr/Wk	Compensation	Contributions to Benefits	Expense Account
Kathy Przywara 503 Mansfield Dr Mountain View, CA 94040	Co-president 15	\$0	\$0	\$0
Roma Hartmann 337 Chatham Way Mountain View, CA 94040	Co-president 13	\$0	\$0	\$0
Colleen Mullenex 22545 Eunice Ave. Mountain View, CA 94040	1st VP, Membership 7	\$0	\$0	\$0
Roxanne Coish 1373 Cuernavaca Circulo Mountain View, CA 94040	Co-2nd VP, Volunteers 7	\$0	\$0	\$0
Karen Bowers 461 Chesley Ave Mountain View, CA 94040	Secretary 5	\$0	\$0	\$0
Lisa Chen 1111 Sussex Sq Mountain View, CA 94040	Treasurer 15	\$0	\$0	\$0
Carol Uyeda 2708 Diericx Drive Mountain View, CA 94040	Historian 5	\$0	\$0	\$0
Sridevi Penmetcha 707 Continental Circle #917 Mountain View, CA 94040	Auditor 4	\$0	\$0	\$0

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*

Type or print	Name of Exempt Organization PTA CALIFORNIA CONGRESS OF PARENTS/ HUFF ELEMENTARY SCHOOL PTA	Employer identification number 77-0492242
File by the due date for filing your return See instructions	Number, street, and room or suite number If a P O box, see instructions 253 MARTENS AVENUE	
	City, town or post office, state, and ZIP code For a foreign address, see instructions MOUNTAIN VIEW, CA 94040-3220	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|--|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input checked="" type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

● The books are in the care of ▶ LISA CHEN -----

Telephone No. ▶ (650) 526-3490 ----- FAX No. ▶ -----

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 2/15, 20 10, to file the exempt organization return for the organization named above.
The extension is for the organization's return for:

- ▶ calendar year 20__ or
- ▶ tax year beginning 7/01, 20 08, and ending 6/30, 20 09.

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.