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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

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

OMB No 1545-0047 2008 Open to Public Inspection

					mopeonon
4	For the 2008 co	alendar y	ear, or tax year beginning 7/01/08 , and ending 6/30/09		
в (Check if applicable	Please	C Name of organization Bentonville High School Choir	D Emplo	yer identification number
_	*	use IRS	Boosters, Inc.		yer recrumound maniber
╝.	Actiress change	label or		ړه ⊢	1 60051 4
	Name change	print or	Doing Business As	84-	1689514
=		type	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Teleph	one number
=	Initial return	See	1901 SE J Street	I	
	Termination	Specific	City or town, state or country and ZIP + 4	G Gross rece	epts\$ 19,721
_		Instruc-	Bentonville AR 72712	G Gloss lece	::045 \$ 237722
⊒ .	Amended return	tions		4	
1	Application pending	F Name	e and address of principal officer	H(a) is this	a group return for
				affiliate	es? Yes X No
				H(b) Are all	affiliates Yes No
					' attach a list (see instructions)
_		us X	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- " No.	attach a hat face manuctions)
<u> </u>	Tax-exempt state		501(c) (3) 4 (insert no) 4947(a)(1) or 527	_	_
J_	Website 🕨	NA		H(c) Group	exemption number
K	Type of organization	n X Cor	poration Trust Association Other ► L Year of formation		M State of legal domicile
Р	art I S	ummai	7		
			he organization's mission or most significant activities		
	1				
e	_	_	de the advancement and development of the choral		
ă	depa	artmen	nt at Bentonville High School.		
Ĕ					
ķ	2 Charlet	his box	If the organization discontinued its operations or disposed of more than 25% of its asse	ste.	
Governance				1 1	
∞ಶ	3 Number	r of voting	members of the governing body (Part VI, line 1a)	3	
es	4 Number	r of indep	endent voting members of the governing body (Part VI, line 1b)	4	
Ę	5 Total nu	umber of	employees (Part V, line 2a)	5	
Activities	1		volunteers (estimate if necessary)	6	
⋖	l			7a	
	1		ated business revenue from Part VIII, line 12, column (C)		
	b Net unre	elated bu	siness taxable income from Form 990-T, line 34	7b	0
			Prior Y		Current Year
a	8 Contribu	utions an	d grants (Part VIII, line 1h)	300	1,596
Revenue	9 Progran	n service	revenue (Part VIII, line 2g)	1,634	
ķ	10 Investm	ent incor	ne (Part VIII, column (A), lines 3, 4, and 7d)		
æ				10,339	18,125
	1			12,273	19,721
	12 Total re	venuea	add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,213	19,721
			ar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits	S ROPERO	Fighter bers (Part IX, column (A), line 4)		
			empensation, employee benefits (Part IX, column (A), lines 5–10)		
enses					
ë	16a Plagess	ional lunc	draising fees (Pard K, column (A), line 11e) expenses (Pard Ign column (D), line 25) ▶		
Exp	b Totel fu	ndraising	expenses (Part 180 polumn (D), line 25)		
ш	17 Other e	xpenses		12,759	18,520
	18 Total ex	നുക	And Mes 18 17 (must equal Part IX, column (A), line 25)	12,759	18,520
			penses Subtract line 18 from line 12	-486	1,201
- K	3	100000	Beginning		End of Year
Net Assets or	20 Total as	seate (Da		11,491	12,692
SS	20 10(a) as				
# 2	21 Fotalila	•	Part X, line 26)	1 401	10 600
		ets or fur	d balances Subtract line 21 from line 20	L1,491	12,692
P	Part II S	Signatu	re Block		
	U	nder penal	ties of perjury. Laterlare that I have examined this return including accompanying schedules and statements, an	id to the best c	f my knowledge
	ar	nd belief, it	is true correct, and complete. Declaration of preparer (other than officer) is based on all information of which pr	reparer has an	y knowledge
\supseteq	1		and a round	- 1 <i>11</i>	2/2/10
ទ្ធីទ			ya cooce		
He	re 🖊		re of officer	Da∕te	/
0		Pr	esicunt		
=1		Type or	print name and title		
$\overline{\mathbf{c}}$	'			L of	Preparer's identifying number
Pa	id P	reparer's	Date Chec self-	`" <u></u>	(see instructions)
	1 0.	gnature /	Travis L. Riggs (1/23/10 empk	oyed 🕨 📙	P00169983
	eparer's		RIGGS & ASSOCIATES, C.P.A., P.A.	EIN	▶ 71-0803002
Us		irm's name	(or yours	<u> </u>	·
		self-emplo ddress, and	(ou),	Phone	479-273-2539
<u> </u>				no 🕨	
N'Aa	v the IRS discu	ice this re	eturn with the preparer shown above? (see instructions)		X Yes No

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

BEN21 Form	990 (2008) Be i	ntonville Hi	gh School Choir	84-1689	9514	Page 2
Pai 1 To	rt III : State Briefly describe to provide	ment of Program he organization's mission the advance	Service Accomplishments	(see instructions)		- Tage a
3	the prior Form 99 If "Yes," describe Did the organizat services? If "Yes," describe Describe the exe Section 501(c)(3) allocations to other	of or 990-EZ? these new services on ion cease conducting, of these changes on Schimpt purpose achievement and 501(c)(4) organiza	or make significant changes in how nedule O ents for each of the organization's the ations and section 4947(a)(1) trusts and revenue, if any, for each programmer.	it conducts, any program hree largest program serv are required to report the ram service reported	vices by expenses	X No
70	(Code	, (Exponded w	ıncludıng grant) (Incording w	
4b	(Code) (Expenses \$	ıncluding grant	s of \$) (Revenue \$	
	(Code) (Expenses \$	including grant	s of \$) (Revenue \$	

(Expenses \$ 18,520 including grants of \$) (Revenue \$ 4e Total program service expenses ▶ \$ 18,520 (Must equal Part IX, Line 25, column (B))

Form **990** (2008)

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complète Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
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_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		<u> </u>
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		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_	Į	77
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			77
_	complete Schedule D, Part III	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			v
	complete Schedule D, Part IV	9		$\frac{\mathbf{x}}{\mathbf{x}}$
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		1	X
42	Parts VI, VII, VIII, IX, or X as applicable Did the executation receive an audited financial statement for the year for which it is completing this return	11		
12	Did the organization receive an audited financial statement for the year for which it is completing this return	12		X
13	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		$\frac{x}{x}$
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		x
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		 -
	business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	145		
. •	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
. •	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
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		X
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 12 If "Yes," complete Schedule I, Parts I and II	21		<u>X</u> _
22	Did the organization report more than \$5,000 on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K. If "No," go to question 25	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			32
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			v
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		<u> </u>
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			v
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			v
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	000	<u>X</u>

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 à direct business relationship with the organization (other than as an officer, director, trustee, or		' '	
	employee), or an indirect business relationship through ownership of more than 35% in another entity			,
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			,
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			[
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		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		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35	1	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		x
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		x

Form **990** (2008)

Pa	irt v Statements Regarding Other IRS Filings and Tax Compliance				
4-	Fates the samples secreted in Day 2 of Form 4000. Accord Common and Toward to I of			Yes	No
1a	,				
	U.S. Information Returns. Enter -0- if not applicable	1a	\dashv		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and re	1b			
·	gaming (gambling) winnings to prize winners?	portable	10		x
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	l [.] [1c		
Lu	Statements, filed for the calendar year ending with or within the year covered by this return	2a		1	
b			2b		
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	113.	20		,
	instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d bv			
	this return?	,	3a		ж
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority .			
	over, a financial account in a foreign country (such as a bank account, securities account, or other 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	Bank			
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity				
	Regarding Prohibited Tax Shelter Transaction?		5c		
	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	ons or			
-	gifts were not tax deductible?		6b	-	
7	Organizations that may receive deductible contributions under section 170(c).	41			
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more \$75?	tnan			x
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7a 7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ie.	10		
·	required to file Form 8282?	15	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d [10	<u> </u>	
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p				
_	benefit contract?	oroonar	7e	-	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as			
	required?		7h		X
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 spor	nsoring			
	organization, have excess business holdings at any time during the year?		8		X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		X
þ	Did the organization make a distribution to a donor, donor advisor, or related person?		9ь		X
0	Section 501(c)(7) organizations. Enter.				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_		
1	Section 501(c)(12) organizations. Enter	.			
а	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
_	amounts due or received from them.)	11b	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	· '	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b			

Form 990 (2008) Bentonville High School Choir 84-1689514 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.) Section A. Governing Body and Management 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 Enter the number of voting members that are independent 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 5 X Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? 7a Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Does the organization have local chapters, branches, or affiliates? 9a X If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? 9Ь 10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations X 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 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 X Section B. Policies Yes No X 12a Does the organization have a written conflict of interest policy? If "No." go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

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	
13	Does the organization have a written whistleblower policy?	13	X
14	Does the organization have a written document retention and destruction policy?	14	X
15	Did the process for determining compensation of the following persons include a review and approval by		
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
а	The organization's CEO, Executive Director, or top management official?	15a	X
b	Other officers or key employees of the organization?	15b	X
	Describe the process in Schedule O. (see instructions)		i
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		ļ
	with a taxable entity during the year?	16a	X
b	If "Yes," has the organization adopted a written policy or procedure requinng the organization to evaluate		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		ľ
	the organization's exempt status with respect to such arrangements?	16b	
500	tion C Disclosure	•	

Sec	tion	C.	Disclosi	ure			
			tataa with		 	 	
47							

17	List the states with w	nich a copy of this	Form 990 is required	to be filed	•	NC	ne
			•				

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) 18 available for public inspection. Indicate how you make these available. Check all that apply.

Own website Another's website Upon request

Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public.

State the name, physical address, and telephone number of the person who possesses the books and records of the 20 organization: Lori Wood 703 NE J Street

AR 72712

479-273-0719

Bentonville

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees; highest <u>compensated employees</u>, and former such persons.

(A)	Posi	tion (((check	all th	nat ap	(vla	(D) Reportable	(E) Reportable	(F) Estimated	
Name and Title	Average hours per week		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)	amount of other compensation from the organization and related organizations
Ginger Smitt President	le								0	•
Lori Wood		<u> </u>			<u> </u>			0	0	0
Treasurer								0	0	0
Vicki Brown								-	-	
Secretary			<u> </u>					0	0	0
·										·····
		 	-	-	-	\vdash				- JUL
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					L.	<u> </u>				
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Form 990 (2008)

compensation from the organization

Pa	<u>ırt V</u>	<u>'III Statei</u>	ment of Rev	enue						
		•					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business	(D) Revenue excluded from tax under sections
								revenue	revenue	512, 513, or 514
at st	1a	Federated car	mpaigns	1a						
<u>ē</u> <u>ā</u>	b	Membership of	dues ,	1b		1,346				
S,E	c	Fundraising e	vents	1c						
ij'n	d			1d						ľ
S, E	e	Government grants		1e						
ë.s	,	All other contributio		'''		·				
PE E	'	and similar amount	s not included above	1f		250				
Contributions, gifts, grants and other similar amounts	_		ļ			250				
a S	9		ons included in lines	la-1f \$		_				
<u> </u>	<u> </u>	Total. Add lin	es 1a-1f			- ▶	1,596			
Program Service Revenue						Busn. Code				
eve	2a					L				
Š	b									
Ϋ́	С									-
Ser	d									
E	е									
g	f	All other progr	ram service rev	enue						
Pr	a	Total. Add lin		01.00		•		·		-
	3		come (including	- divido	nde intere					
		other similar a		y aivide	nas, miere	331, alitu				
	4		•							·
	4		nvestment of ta	ıx-exen	npt bona p	roceeds				
	5	Royalties			T	•			•••	
	_		(ı) Real		(u) P	ersonal	İ			
	6a	Gross Rents	ļ		ļ					
	b	Less rental exps			ļ		ļ			'
	C	Rental inc or (loss)			ĺ			,		
i	_d	Net rental inco	me or (loss)		_	▶				
	7a	Gross amount from sales of assets	(ı) Secunti	es	(11)	Other				
		other than inventory								
	b	Less cost or other								
		basis & sales exps								
	c	Gain or (loss)			†~					
		Net gain or (lo			I .					
			om fundraising ev	onte						
	oa		on fundraising evi	51113	1					
ᇎ		(not including \$								
Š			reported on line 10							
٣		See Part IV, line		а						:
Other Revenue		Less direct ex		b						
δ			(loss) from fur		g events					_
	9a		om gamıng activiti	es	İ	ŀ				
		See Part IV, line	19	а		<u></u>				
	b	Less direct ex	rpenses	þ	L					
ı	С	Net income or	(loss) from ga	ming ac	tivities	▶			·	
	10a	Gross sales of	f inventory, les	5						
		returns and all	•	а						
	h	Less cost of g		b						
		-	(loss) from sal							
ŀ			ellaneous Revenu		ventory	Busn. Code		· · · · · · · · · · · · · · · · · · ·		
ŀ	44-					Susii. Code	14 020	14 000		
- 1	11a	•	Choir Event			 - 	14,039	14,039		·
	b	Other Gen	eral Fundra	ısınğ		 -	4,086	4,086		
	С					 				
	d	All other rever				Щ				
	е	Total. Add line				▶	18,125			
	12	Total Revenu	e. Add lines 1h	, 2g, 3,	4, 5, 6d, 7	7d, 8c,				
		9c, 10c, and 1	1e			▶	19,721	18,125	0	0

Part IX Statement of Functional Expenses

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

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

	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
_	organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in				İ
	the U S See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				-
5	Compensation of current officers, directors,				
_	trustees, and key employees	·	······································		
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages		_		
8	Pension plan contributions (include section 401(k)	[
_	and section 403(b) employer contributions)	·			+
9	Other employee benefits				
10	Payroll taxes			-	-
11	Fees for services (non-employees)				
а	Management				
	Legal	250	250		
	Accounting	250	250		
	Lobbying				
_	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
-	Other				
12		305	305		
13	Office expenses	303	303		+
14	Information technology				<u> </u>
15 16	Royalties			-	
10 17	Occupancy Travel	12,619	12,619		
			12,019		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
10	-				
1 9 20	Conferences, conventions, and meetings Interest				
20 21	Payments to affiliates		·		
21 22	Depreciation, depletion, and amortization				
22 23	Insurance				
	niodi arioc				
24	Other expenses Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
а	Other Expenses	5,346	5,346		
b					
c	•				
d	·				
e	•				
f	All other expenses				
25_	Total functional expenses. Add lines 1 through 24f	18,520	18,520		
26	Joint Costs. Check here ▶ if following				
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

	art)	K Balance Sneet										
			(A) Beginning of year		(B) End of							
	T 4	Cash—non-interest bearing	11,491	1		12,6	502					
	1		11,491	2		LZ, (192					
	2	Savings and temporary cash investments	•	3								
	3	Pledges and grants receivable, net		_								
	4	Accounts receivable, net		4								
	5	Receivables from current and former officers, directors, trustees, key		_								
	۱.	employees, or other related parties. Complete Part II of Schedule L		5								
	6	Receivables from other disqualified persons (as defined under section	<u> </u>									
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete	-	-	-	-						
	_	Part II of Schedule L	<u></u>	6		-						
Assets	7	Notes and loans receivable, net		7								
28	8	Inventories for sale or use		8								
Ä	9	Prepaid expenses and deferred charges		9								
	10a	Land, buildings, and equipment cost basis										
	b	Less accumulated depreciation. Complete	_									
		Part VI of Schedule D	u _p .,	10c								
	11	Investments—publicly traded securities .		11	· · · · · · · · · · · · · · · · · · ·							
	12 Investments—other securities See Part IV, line 11											
	13	investments—program-related See Part IV, line 11		13								
	14	Intangible assets		14								
	15	Other assets See Part IV, line 11		15								
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,491	16		L2,€	592					
	17	Accounts payable and accrued expenses		17								
	18	Grants payable		18								
	19	Deferred revenue		19								
	20	Tax-exempt bond liabilities		20								
es S	21	Escrow account liability Complete Part IV of Schedule D		21								
Liabilities	22	Payables to current and former officers, directors, trustees, key										
Ö		employees, highest compensated employees, and disqualified										
<u>:</u>		persons Complete Part II of Schedule L		22								
	23	Secured mortgages and notes payable to unrelated third parties		23								
	24	Unsecured notes and loans payable		24								
	25	Other liabilities. Complete Part X of Schedule D		25								
	26			26	<u> </u>							
<u></u>	20	Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here▶		20								
nces		•										
ă		complete lines 27 through 29, and lines 33 and 34.	11,491			L2,6	502					
Bala	27	Unrestricted net assets	11,491			12,0)] Z					
	28	Temporanly restricted net assets		28								
Ĕ	29	Permanently restricted net assets		29								
屲		Organizations that do not follow SFAS 117, check her▶	1									
or Fund		and complete lines 30 through 34.			-							
ţ	30	Capital stock or trust principal, or current funds		30								
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31								
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32								
Net	33	Total net assets or fund balances	11,491			L2,6						
z	34	Total liabilities and net assets/fund balances	11,491	34		12,6	<u> 592</u>					
<u>P</u>	art >	(I Financial Statements and Reporting										
			_			Yes	No					
1	Ac	counting method used to prepare the Form 990 🛛 Cash 🔲 Accru	ıal 🗌 Other			- [
2	a We	ere the organization's financial statements compiled or reviewed by an indep	endent accountant?		2a		X					
t		ere the organization's financial statements audited by an independent accou	• •		2b		X					
(Yes" to lines 2a or 2b, does the organization have a committee that assume	• • •	•								
		e audit, review, or compilation of its financial statements and selection of an	-		2c							
3:		a result of a federal award, was the organization required to undergo an aud										
-		Single Audit Act and OMB Circular A-133?			3a							
		Yes," did the organization undergo the required audit or audits?		•	3b							
	<u>. ''</u>	100) and the organization and organization addition addition			<u>, 00 j</u>	000						

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.

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

OMB No 1545-0047 2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Bentonville High School Choir Boosters, Inc.

Employer identification number 84-1689514

Pa	art I	Reas	on for Public Charity	Status (All organizations	s must o	comple	te mis	part.)	(see i	nstru	cuons)		
The organization is not a private foundation because it is: (Please check onlyone organization)													
1													
2	П	A school des	described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	П		or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.)										
4	П	•	research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
•	ш	city, and state											
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in											
J	ш	section 170(b)(1)(A)(iv). (Complete Part II)											
					4: 47	0/L\/4\/A	V. A						
6	Н	•	•	overnmental unit described in s				e			_		
7	Ш	=	•	substantial part of its support fro	om a gove	ernmenta	unit or	rom the	genera	ii public	3		
		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	X												
		receipts from	activities related to its exem	npt functions—subject to certain	exceptio	ns, and (2	2) no mo	re than	33 1/3	% of its	i		
		support from	gross investment income ar	nd unrelated business taxable in	come (le	ss section	1 511 tax	c) from b	usines	ses			
		acquired by t	he organization after June 3	0, 1975 See section 509(a)(2)	. (Comple	te Part III	.)						
10	Ш	An organizati	on organized and operated	exclusively to test for public safe	ety See s	section 5	09(a)(4)	. (see in	structio	ns)			
11	\sqcup	An organizati	on organized and operated o	exclusively for the benefit of, to	perform t	he functio	ns of, o	r to carr	out the	е			
		purposes of c	ne or more publicly support	ed organizations described in se	ection 509	9(a)(1) or	section	509(a)(2	2). See	sectior	1		
		509(a)(3). Ch	eck the box that describes t	he type o <u>f s</u> upporting organizati	on and co	omplete In	nes 11e	through	11h.				
		a Type	I b Type II	c Type III–Functiona	ally Integr	ated	d	Тур	e III–Ot	her			
е		By checking t	his box, I certify that the org	anization is not controlled direc	tly or indi	ectly by	one or m	ore disc	ualified				
		persons othe	r than foundation managers	and other than one or more pub	olicly supp	orted org	anızatıo	ns desc	nbed in	section	1		
		509(a)(1) or s	section 509(a)(2).										
f		If the organiz	ation received a written dete	rmination from the IRS that it is	a Type I,	Type II,	or Type	III suppo	orting				
		organization,	check this box				• •						
g		Since August	17, 2006, has the organizat	tion accepted any gift or contrib	ution from	any of th	ne						_
3		following per		. , , ,		•							
				ontrols, either alone or together	with perso	ons descr	ibed in (n)				Yes	No
		• • •	•	f the supported organization?			(,			11g(i)		
		• •	member of a person describ	· · · · ·				•		•	11g(ıı		
			· ·	described in (i) or (ii) above?					•		11g(ii		
h				he organizations the organization	n sunnar	te					<u>a(</u>	71	1
					T				T				
• •		me of supported (ii) EIN organization		(iii) Type of organization (described on lines 1–9	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in		(vi) is the organization in col			nount of port	
	organization		above or IRC section					of your	(i) organized in the			P 0.1	
				(see instructions))			support?			S ?	}		
					Yes	No	Yes	No	Yes	No			
							Ì						
		-											
					ļ	-		<u> </u>	ļ				
								<u> </u>	 		_		
					1	I	l -		1	l	l		

Page 2

Pa	irt II Support Schedule for O)(1)(A)(iv) and	170(b)(1)(A)(vi))
	(Complete only if you ch	ecked the box	on line 5, 7, c	or 8 of Part I.)			<u> </u>
	tion A. Public Support						
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1-3			ļ			
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						
Sec	tion B. Total Support						
Ca	lendar 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	(<u> </u>		L	
12	Gross receipts from related activities, etc	` '				12	
13	First five years. If the Form 990 is for the	-	t, second, third, fo	ourth, or fifth tax yea	ar as a section 50	1(c)(3)	- □
Sec	organization, check this box and stop her tion C. Computation of Public Su		tage				
<u>000</u> 14	Public support percentage for 2008 (line 6	·		nn (fl)	······	14	<u></u> %
15	Public support percentage from 2007 Scho			III (1 <i>))</i>	•	15	
	33 1/3 % support test—2008. If the organ			13 and line 14 is	33 1/3 % or more		
	and stop here. The organization qualifies				00 170 70 01 111010	OHOOK BIIO DOX	▶ 🗌
b	33 1/3 % support test—2007. If the organ		•		15 is 33 1/3 % or i	more, check this	
-	box and stop here . The organization quali						▶ □
17a	10%-facts-and-circumstances test—200	•		•	Sa. or 16b. and line	e 14 is 10% or	-
-	more, and if the organization meets the "fa						
	organization meets the "facts-and-circums						▶ □
b	10%-facts-and-circumstances test—200						
	more, and if the organization meets the "fa	-					
	organization meets the "facts-and-circums			-	•		▶ 🗌
18	Private foundation. If the organization did		•		.,		▶ 🗍

Section A. Public Support

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.)

Ca	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		1,654	3,308	300	250	5,512
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		16,636	41,975	51,325	34,635	144,571
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5		18,290	45,283	51,625	34,885	150,083
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons					Ì	
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from		18,290	45,283	51,625	34,885	
•	line 6)		10,230	13,203	31,023	34,003	150,083
Sec	tion B. Total Support	<u></u>		t		<u>.</u>	
Cal	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6		18,290	45,283	51,625	34,885	150,083
10a	Gross income from interest, dividends, payments received on secunties loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12.)		18,290	45,283	51,625	34,885	150,083
14	First five years. If the Form 990 is for the	organization's firs	t, second, third, fou	rth, or fifth tax yea	ar as a section 501	(c)(3)	
	organization, check this box and stop her	е					▶
<u>Sec</u>	tion C. Computation of Public Su	upport Percent	tage				
15	Public support percentage for 2008 (line 8	, column (f) divided	d by line 13, column	n (f))		. 15	100.0000 %
16	Public support percentage from 2007 Sch				·	16	100.0000 %
Sec	tion D. Computation of Investme						%
17		ment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))					
18	Investment income percentage from 2007					18	
19a	33 1/3 % support tests—2008. If the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if the organization of the support tests—2008, if						▶ X
b	33 1/3 % support tests—2007. If the orga		-	•			
	line 18 is not more than 33 1/3 %, check the						▶ [
20	Private foundation. If the organization did		=		• • •	-	▶ [

BEN21

Schedule A (Form 990 or 990-EZ) 2008 Bentonville High School Choir

84-1689514

Page 4

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

BEN21

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Bentonville High School Choir Boosters, Inc.

Employer identification number 84-1689514

Form 990, Part III, Line 4d - All Other Achievements To provide support to the Bentonville High School Choir department.

Form 990	Special Events Schedule						
	For calendar year 2008, or	tax year beginning	7/01/08 , and	ending 6/30/09	2008		
ame				Employer Id	entification Numbe		
	ligh School Cho	oir					
Boosters, Inc	3		·	84-168	9514		
	/A\	(B)	(C)	Others	Total		
	(A)	(D)	\ - /	Others	i Otai		
Gross receipts	19,584	15,051	_ 0	0			
Gross receipts Less contributions			0 -	0 0			
• –				0 0	34,63		
Less contributions	19,584	15,051	0 0 0 0	0 0 0 0	34,63 34,63 16,51		

Description	(A)	Madrigal Choir Event			
	(B)	Other General Fundraising			
	(C)				
	Others				
		 			
					
		\$100 to 100			