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Form **990-EZ****Short Form**
Return of Organization Exempt From Income TaxUnder 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
- The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2008**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

A For the 2008 calendar year, or tax year beginning 7/01/08 , and ending 6/30/09							
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	<table border="1"> <tr> <td>C Name of organization Maplewood PTA, Inc.</td> <td>D Employer identification number 91-1204882</td> </tr> <tr> <td>Number and street (or P.O. box, if mail is not delivered to street address) 1110 West Pioneer</td> <td>E Telephone number 253-848-3272</td> </tr> <tr> <td>City or town, state or country, and ZIP + 4 Puyallup WA 98371</td> <td>F Group Exemption Number</td> </tr> </table>	C Name of organization Maplewood PTA, Inc.	D Employer identification number 91-1204882	Number and street (or P.O. box, if mail is not delivered to street address) 1110 West Pioneer	E Telephone number 253-848-3272	City or town, state or country, and ZIP + 4 Puyallup WA 98371	F Group Exemption Number
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• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method: ☒ Cash ☐ Accrual
Other (specify) _____

I Website: N/A	H Check <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).
J Organization type (check only one)— <input checked="" type="checkbox"/> 501(c) (3) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
K Check <input type="checkbox"/> 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 **\$ 39,509**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)																																	
Revenue	<table border="1"> <tr><td>1 Contributions, gifts, grants, and similar amounts received</td><td>1 1,294</td></tr> <tr><td>2 Program service revenue including government fees and contracts</td><td>2 16,007</td></tr> <tr><td>3 Membership dues and assessments</td><td>3 1,414</td></tr> <tr><td>4 Investment income</td><td>4 35</td></tr> <tr><td>5a Gross amount from sale of assets other than inventory</td><td>5a</td></tr> <tr><td>b Less: cost or other basis and sales expenses</td><td>5b</td></tr> <tr><td>c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach sch.)</td><td>5c</td></tr> <tr><td>6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/></td><td></td></tr> <tr><td>a Gross revenue (not including \$ _____ of contributions reported on line 1)</td><td>6a 20,759</td></tr> <tr><td>b Less: direct expenses other than fundraising expenses</td><td>6b 11,810</td></tr> <tr><td>c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)</td><td>6c 8,949</td></tr> <tr><td>7a Gross sales of inventory, less returns and allowances</td><td>7a</td></tr> <tr><td>b Less: cost of goods sold</td><td>7b</td></tr> <tr><td>c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)</td><td>7c</td></tr> <tr><td>8 Other revenue (describe _____)</td><td>8</td></tr> <tr><td>9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8</td><td>9 27,699</td></tr> </table>	1 Contributions, gifts, grants, and similar amounts received	1 1,294	2 Program service revenue including government fees and contracts	2 16,007	3 Membership dues and assessments	3 1,414	4 Investment income	4 35	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 line 5b from line 5a) (attach 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 20,759	b Less: direct expenses other than fundraising expenses	6b 11,810	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 8,949	7a Gross sales of inventory, less returns and allowances	7a	b Less: cost of goods sold	7b	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	8 Other revenue (describe _____)	8	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9 27,699
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Net Assets	<table border="1"> <tr><td>18 Excess or (deficit) for the year (Subtract line 17 from line 9)</td><td>18 3,277</td></tr> <tr><td>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)</td><td>19 14,411</td></tr> <tr><td>20 Other changes in net assets or fund balances (attach explanation)</td><td>20</td></tr> <tr><td>21 Net assets or fund balances at end of year. Combine lines 18 through 20</td><td>21 17,688</td></tr> </table>	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 3,277	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 14,411	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 17,688																								
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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	14,411	17,688
23 Land and buildings		
24 Other assets (describe _____)		
25 Total assets	14,411	17,688
26 Total liabilities (describe _____)	0	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	14,411	17,688

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

Form 990-EZ (2008)

DAA

P 19

SCANNED JAN 27 2010

Part V Other Information (Note the statement requirements in the instructions for Part VI.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instr. 37a		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?		X
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ; section 4912 ; section 4955 ;		
b Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L, Part I		X
c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ;		
d Enter amount of tax on line 40c reimbursed by the organization ;		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41 List the states with which a copy of this return is filed. None		
42a The books are in care of Wanda Heath Telephone no. 253-848-3272 1110 West Pioneer Located at Puyallup, WA ZIP + 4 98371		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
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.		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?		X
If "Yes," enter the name of the foreign country: ;		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		X

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.

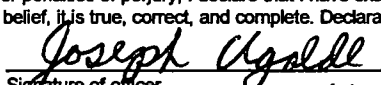
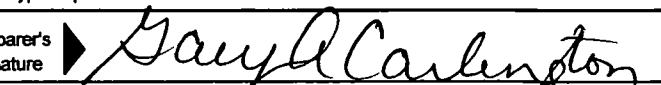
	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	X
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	X
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	X
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	X
b If "Yes," was the related organization(s) a section 527 organization?	49b	

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 & 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 each receiving over \$100,000		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
	 Signature of officer		Date 13 JAN 10		
Paid Preparer's Use Only	 Preparer's signature		Date 11/30/09	Check if self-employed <input type="checkbox"/>	Preparer's Identifying Number (See Instr.) P00039018
	Firm's name (or yours if self-employed), Gary A. Carlington, CPA, Inc.		EIN 253-848-2907		
	address, and ZIP + 4 317 4th St Northwest Puyallup, WA 98371-4313		Phone no 253-848-2907		
	May the IRS discuss this return with the preparer shown above? See instructions <input type="checkbox"/> Yes <input type="checkbox"/> No				

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
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 from 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 line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 33 1/3 % support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10%-facts-and-circumstances test—2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	19,874	13,922	16,453	2,183	2,708	55,140
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	33,960	48,781	25,107	24,285	24,956	157,089
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	53,834	62,703	41,560	26,468	27,664	212,229
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						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)	53,834	62,703	41,560	26,468	27,664	212,229

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	53,834	62,703	41,560	26,468	27,664	212,229
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	126	213	55	49	35	478
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	126	213	55	49	35	478
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried 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.)	53,960	62,916	41,615	26,517	27,699	212,707
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	99.7753 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	99.8003 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	0.2247 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	0.1997 %

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

Federal Statements

11/30/2009 8:49 AM

Statement 1 - Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

<u>Description</u>	<u>Amount</u>
Membership Income	\$ 1,414
Total	\$ 1,414

Statement 2 - Form 990-EZ, Part I, Line 16 - Other Expenses

<u>Description</u>	<u>Amount</u>
Expenses	\$
Assemblies	684
Awards/Recognition	1,142
Committee Expenses	359
Family Activities	2,543
Insurance	510
Leadership Education	40
Licenses & Fees	20
Membership Services	1,265
Miscellaneous Admin	132
Other Special Projects	12,702
Postage and Banking Fees	110
School Support	4,235
Total	\$ 23,742

Statement 3 - Form 990-EZ, Part III - Organization's Primary Exempt Purpose

Description

To promote the health, welfare, safety, and education of children and youth.

Statement 4 - Form 990-EZ, Part III, Line 31 - Statement of Program Service Accomplishments

Description

Family Activities: provides fun events to promote quality time spent between parents, students, and teachers.
Other Special Projects, Leadership Education, Committee Expenses, Recognition, State PTA Membership.

36701 Maplewood PTA, Inc.
91-1204882
FYE: 6/30/2009

Federal Statements

11/30/2009 8:49 AM

Form 990-EZ, Part II, Line 23 - Land and Buildings

Description	Beginning of Year	Accumulated Depreciation	End of Year	Accumulated Depreciation
Equipment	\$ 5,951	\$ 5,951	5,951	\$ 5,951
Total	\$ 5,951	\$ 5,951	5,951	\$ 5,951

Special Events Direct Expenses

<u>Description</u>	<u>Amount</u>
Column A	\$
Various Fundraisers	
Direct Fundraising Expens	<u>11,810</u>
SubTotal	<u>11,810</u>
Total	<u><u>11,810</u></u>

Direct expenses other than fundraising expenses
reported on Form 990-EZ, page 1, line 6b.

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus % 179	Sec Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:									
1	Popcorn Machine	7/01/94	500			500	7 HY 200DB	500	0
2	35 MM Camera	7/01/94	85			85	7 HY 200DB	85	0
3	Polaroid Camera	7/01/94	50			50	7 HY 200DB	50	0
4	Video Camera	6/30/95	1,041			1,041	7 HY 200DB	1,041	0
5	Carnival Equipment	7/01/94	200			200	7 HY 200DB	200	0
6	2 Coffee Pots	7/01/94	140			140	7 HY 200DB	140	0
7	Button Maker	7/01/94	100			100	7 HY 200DB	100	0
8	Large Field Day Ball	7/01/94	250			250	7 HY 200DB	250	0
9	Large Vinyl Maplewood Banner	7/01/94	400			400	7 HY 200DB	400	0
10	2 Five Gallon Drink Containers	7/01/94	40			40	7 HY 200DB	40	0
11	One Safety Backpack	7/01/94	30			30	7 HY 200DB	30	0
12	Computer	6/18/98	2,350			2,350	5 HY 200DB	2,350	0
13	Coffee Maker/Cart	10/06/98	136			136	7 HY 200DB	136	0
14	Freezer	9/28/99	629			629	7 HY 200DB	629	0
			<u>5,951</u>			<u>5,951</u>		<u>5,951</u>	<u>0</u>
Grand Totals			5,951			5,951		5,951	0
Less: Dispositions			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>5,951</u>			<u>5,951</u>		<u>5,951</u>	<u>0</u>

Form **8868**
(Rev. April 2009)**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

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 ☒ **X**
- 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 File by the due date for filing your return. See instructions.	Name of Exempt Organization	Employer identification number
	Maplewood PTA, Inc.	91-1204882
	Number, street, and room or suite no. If a P.O. box, see instructions. 1110 West Pioneer	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Puyallup WA 98371	

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

- ☒ Form 990
- ☐ Form 990-BL
- ☐ Form 990-EZ
- ☐ Form 990-PF

- ☐ Form 990-T (corporation)
- ☐ Form 990-T (sec. 401(a) or 408(a) trust)
- ☐ Form 990-T (trust other than above)
- ☐ Form 1041-A

- ☐ Form 4720
- ☐ Form 5227
- ☐ Form 6069
- ☐ Form 8870

- The books are in the care of ▶ **Wanda Heath**

Telephone No. ▶ **253-848-3272**

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 **2/15/10**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ ☐ calendar year or
- ▶ ☒ tax year beginning **7/01/08**, and ending **6/30/09**

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	\$
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	\$
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	\$

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.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev 4-2009)