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Statute clear

0907

OMB No 1545-1150

Form **990-EZ**

Short Form 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)

▶ 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

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2008 calendar year, or tax year beginning 08/01, 2008, and ending 07/31, 20 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	Please use IRS label or print or type. See Specific Instructions	C Name of organization Expo Elementary Council of Parents and Teachers Inc		D Employer identification number 26 : 0119855
		Number and street (or P O box, if mail is not delivered to street address) Room/suite 540 South Warwick Street	E Telephone number (651) 290-8384	
		City or town, state or country, and ZIP + 4 Saint Paul, MN 55116		F Group Exemption Number ▶

• 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: ▶
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 ▶ \$ 91,312

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

Revenue	Expenses	Net Assets	Line	Amount
1			1	28,883
2			2	0
3			3	0
4			4	853
5a			5a	0
b			5b	0
c			5c	0
6				
a			6a	61,576
b			6b	35,945
c			6c	25,631
7a			7a	0
b			7b	0
c			7c	0
8			8	0
9			9	55,367
10			10	13,388
11			11	0
12			12	0
13			13	2,631
14			14	0
15			15	0
16			16	45,761
17			17	61,780
18			18	-6,413
19			19	59,783
20			20	0
21			21	53,370

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	59,783	22 53,370
23 Land and buildings	0	23 0
24 Other assets (describe ▶)	0	24 0
25 Total assets	59,783	25 53,370
26 Total liabilities (describe ▶)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	59,783	27 53,370

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

Cat No 106421

Form 990-EZ (2008)

0436535253 SEP 25 '14
POSTMARK DATE
SEP 12 2014

SCANNED OCT 07 2014

RECEIVED
SEP 22 2014
IR-SOS
OGDEN, UT

See Statement 1
STATUTE UNIT
RECEIVED
SEP 24 2008
TPR BRANCH
OGDEN

69
M/E

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)		Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others)	
What is the organization's primary exempt purpose? See Statement 3			
Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title			
28	The Council raised \$54,514 through fundraising events and donation solicitations. \$29,545 of this was used to directly support the classrooms and community of Expo Elementary school by (Continued on Statement 4) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	29,545
29	Through fundraising efforts and donation requests over the last 3 years, the Council has collected \$13,388 which was granted to Saint Paul Public Schools to repair Treasure Island (Continued on Statement 5) (Grants \$ 13,388) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	13,388
30	The Council also collected and spent funds on field trips for the students at Expo Elementary. The largest trip was for the 6th grade class to participate in a community building camping trip (Continued on Statement 6) (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	13,826
31	Other program services (attach schedule) See Statement 7 (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	2,717
32	Total program service expenses (add lines 28a through 31a) <input type="checkbox"/>	32	59,476

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV)				
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Carol Moran 540 South Warwick Street, Saint Paul, MN 55116	Co-chair, 2	0	0	0
Marc Schemerhorn 540 South Warwick Street, Saint Paul, MN 55116	Co-Chair, 2	0	0	0
Beth Black 540 South Warwick Street, Saint Paul, MN 55116	Secretary, 2	0	0	0
Dave Wein 540 South Warwick Street, Saint Paul, MN 55116	Treasurer, 2	0	0	0
Mark Mueller 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Darren Yerama 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Jerrold Amadick 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Shamiere Bridgeford 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
John Reimer 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Betsy Skagen 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Ned Zimmerman-Bence 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Bob Breck 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Deb Fitzpatrick 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Gail Pierce 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Nina Boyd 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Jean Bergstrom 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Ary Howard 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0
Kristi Tschida 540 South Warwick Street, Saint Paul, MN 55116	Board Member, 1	0	0	0

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		✓
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		✓
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?		✓
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		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		✓
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?		✓
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 ▶ 0, section 4912 ▶ 0; section 4955 ▶ 0		
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		✓
c	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d	Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
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		✓
41	List the states with which a copy of this return is filed ▶ MN		
42a	The books are in care of ▶ Paul S Jones Telephone no. ▶ (651) 644-6346 Located at ▶ 1455 Hamline Avenue North, Saint Paul, MN 55108 ZIP + 4 ▶ 55108		
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)? 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.	Yes No	✓
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country ▶ _____	Yes No	✓
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 <input type="checkbox"/>		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	Yes No	✓
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	Yes No	✓

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 | | ✓ |
| 47 | | ✓ |
| 48 | | ✓ |
| 49a | | ✓ |
| 49b | | |
- 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
- 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II
- 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a Did the organization make any transfers to an exempt non-charitable related organization?
- 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 & 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] Date 1/31/13

Signature of officer

Dan Schibel, Co-Chair

Type or print name and title

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: 1/31/13 Check if self-employed: Preparer's Identifying Number (See instructions): P01232821

Firm's name (or yours if self-employed), address, and ZIP + 4: **MAP for Nonprofits** EIN: Phone no: (651) 393-2161

2314 University Avenue W, Saint Paul, MN 55114

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

Expo Elementary Council of Parents and Teachers Inc

Employer identification number

26 0119855

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

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

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 - a Type I b Type II c Type III—Functionally integrated d Type III—Other
 - e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
 - f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 - g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

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 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**

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

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

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

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

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

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.")		73,693	67,687	48,090	28,883	218,353
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				59,939	61,576	121,515
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						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1-5	0	73,693	67,687	108,029	90,459	339,868
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)						339,868

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	0	73,693	67,687	108,029	90,459	339,868
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources		224	720	1,078	853	2,875
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	0	224	720	1,078	853	2,875
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)						342,743

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	%
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	%

Section D. Computation of Investment Income Percentage

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

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

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)

Area with horizontal dashed lines for supplemental information.

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

		(a) Event #1 <u>Sally Foster Giftw</u> (event type)	(b) Event #2 <u>Fall FunRaiser</u> (event type)	(c) Other Events <u>1</u> (total number)	(d) Total Events (Add col (a) through col (c))	
Revenue	1	Gross receipts	21,253	9,366	7,781	38,400
	2	Less: Charitable contributions	0	0	0	0
	3	Gross revenue (line 1 minus line 2)	21,253	9,366	7,781	38,400
Direct Expenses	4	Cash prizes	0	0	0	0
	5	Non-cash prizes	0	0	0	0
	6	Rent/facility costs	0	0	0	0
	7	Other direct expenses	10,382	6,264	3,509	20,155
	8	Direct expense summary. Add lines 4 through 7 in column (d) ▶				(20,155)
	9	Net income summary. Combine lines 3 and 8 in column (d) ▶				18,245

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?	9a	
b	If "No," Explain: _____		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	
b	If "Yes," Explain: _____		
11	Does the organization operate gaming activities with nonmembers?	11	
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?	12	

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

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

Name ▶

Address ▶

16. Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

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		

Statement 1 : Grants and Similar Amounts Paid

Statement 2 : Other Expenses Schedule

Statement 3 : Primary Exempt Purpose

Statement 4 : First Program Service Accomplishments Description

Statement 5 : Second Program Service Accomplishments Description

Statement 6 : Third Program Service Accomplishments Description

Statement 7 : Other Program Service Accomplishments

Statement 1

Form 990-EZ

Page 1

Line Number Part I Line 10

Expo Elementary Council of Parents and Teachers Inc

26-0119855

Grants and Similar Amounts Paid

	Book Value	FMV Amount
Type of Activity: General		13,388
Donee's name and address: Saint Paul Public Schools 360 Colborne Street Saint Paul, MN 55102		
Purpose of payment to affiliate:		
Relationship:		
Description:		
How Book Value Determined:		
How FMV Determined:		
Date of Gift:		
Total:	0	13,388

Statement 2

Expo Elementary Council of Parents and Teachers Inc

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26-0119855

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Line Number Part I Line 16

Other Expenses Schedule

Description	Amount
Community event expense	3,194
Field trip expense	13,826
Classroom supplies	11,491
Program expenses	14,860
Management expenses	2,092
Bank fees	150
Other expenses	148
Total:	45,761

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Line Number Part III

Expo Elementary Council of Parents and Teachers Inc

26-0119855

Primary Exempt Purpose

Primary Exempt Purpose

The purpose of Expo Elementary Council of Parents and Teachers, Inc (the Council) is to support the students and staff of Expo Elementary School, a kindergarten through 6th grade public school within the Saint Paul Public School system, and to further the educational goals of the school in any way it can, including fundraising to generate funds used to pay for classroom supplies, field trips, invited speakers and performers who visit the school, community building activities and other items

Statement 4

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Line Number: Part III Line 28

Expo Elementary Council of Parents and Teachers Inc

26-0119855

First Program Service Accomplishments Description

Description

paying for classroom supplies and community event expenses There were 718 students at Expo Elementary this year

Statement 5

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Line Number Part III Line 29

Expo Elementary Council of Parents and Teachers Inc

26-0119855

Second Program Service Accomplishments Description

Description

Playground located at Expo Elementary School This playground is used by the 718 students at Expo Elementary as well as many families in the surrounding neighborhood

Statement 6

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Line Number Part III Line 30

Expo Elementary Council of Parents and Teachers Inc

26-0119855

Third Program Service Accomplishments Description

Description

for 5 days in the Boundary Waters Canoe Area in northern Minnesota All classes go on smaller, local field trips

Statement 7

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Line Number Part III Line 31

Expo Elementary Council of Parents and Teachers Inc

26-0119855

Other Program Service Accomplishments

Description	Grants And Allocations	Includes Foreign Grants	Program Service Expenses
Other funds were spent on visiting performers and speakers who came to Expo Elementary, services rendered including on-site childcare for parents who attend Expo Elementary community meetings and other miscellaneous items that benefit the Expo Elementary community	0		2,717
Total:			2,717