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Form **990-EZ**Department of the Treasury
Internal Revenue Service**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****A For the 2008 calendar year, or tax year beginning** **September 1** , 2008, and ending **August 31** , 20 **09****B** Check if applicable:

- ☐
- Address change
-
- ☐
- Name change
-
- ☐
- Initial return
-
- ☐
- Termination
-
- ☐
- Amended return
-
- ☐
- Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instruc-
tions.**C** Name of organization**Garrisonville Elementary School Parent Teacher Organization**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

100 Wood Drive

City or town, state or country, and ZIP + 4

Stafford, Virginia, 22556-1838**D** Employer identification number**35 2324073****E** Telephone number**(540) 658-6260****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:** ► **www.stafford.garrisonvilleschoolfusion.us (click PTO)****H** Check ☒ if the organization is not
required to attach Schedule B (Form 990,
990-EZ, or 990-PF).**J Organization type** (check only one)— ☒ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**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. ► \$ **60,162****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	10,782
	2	Program service revenue including government fees and contracts	2	14579
	3	Membership dues and assessments	3	0
	4	Investment income Bank Account Interest	4	170
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (attach schedule)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☒		
	6a	Gross revenue (not including \$ of contributions reported on line 1)	6a	28,789
	6b	Less: direct expenses other than fundraising expenses	6b	8351
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	20438	
Expenses	7a	Gross sales of inventory, less returns and allowances	7a	5842
	7b	Less: cost of goods sold	7b	4279
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1563
	8	Other revenue (describe ►)	8	0
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.	9	47,532
Expenses	10	Grants and similar amounts paid (attach schedule)	10	32794
	11	Benefits paid to or for members	11	135
	12	Salaries, other compensation, and employee benefits	12	0
	13	Professional fees and other payments to independent contractors	13	0
	14	Occupancy, rent, utilities, and maintenance	14	879
	15	Printing, publications, postage, and shipping	15	
	16	Other expenses (describe ► Fundraising Expenses)	16	9106
	17	Total expenses. Add lines 10 through 16	17	42914
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	4618
	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	6870
	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	11488

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	6,870	22 11488
23 Land and buildings	0	23 0
24 Other assets (describe ►)	0	24 0
25 Total assets	6,870	25 11488
26 Total liabilities (describe ►)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	6,870	27 11488

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

Cat No 106421

Form **990-EZ** (2008)

SCANNED JAN 21 2010.

8

Expenses

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others.)

28 Educational Technology includes: 13 portable document cameras & 4 Smart Boards @ \$12,360 benefiting K-5 classrooms at Garrisonville Elementary School.

(Grants \$) If this amount includes foreign grants, check here ☐

28a	12,360
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29 **School Expenses: Agendas for K-5 students @ \$3090; Office Copier @ \$2309; Field Day Toys @ \$61; Overdue Student Lunch Accounts @ \$30; Paper/Mailroom Copier @ \$7000; Jump Rope for Heart Prizes @ \$187; Staff Appreciation for all staff @ \$1,506; ice cream for social @ 67.54**

(Grants \$) If this amount includes foreign grants, check here ☐

29a	14956
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30 **School Programs: 5 Assembly programs totaling \$3,197 for K-5 students; Dare Day Shirts for all 5th Grade Students @ \$788; Music Shirts for Art Festival for 10 students @ \$100; Reading Lab Scholastic Books for K-5 @ \$874; Accelerated Reader Prizes for K-5 @ \$363; Guidance @ \$157**

(Grants \$) If this amount includes foreign grants, check here ☐

30a	5478
-----	------

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here ☐

31a

32 Total program service expenses (add lines 28a through 31a)

32	32.794
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(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
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Form **990-EZ** (2008)

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	33	✓
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	34	✓
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?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a	37a	
b Did the organization file Form 1120-POL for this year?	37b	
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?	38a	✓
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	40b	✓
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.	40e	✓
41 List the states with which a copy of this return is filed. ►		
42a The books are in care of ► <u>Cynthia Harris</u> Telephone no. ► (<u>540</u>) <u>658-6260</u> Located at ► <u>100 Wood Drive, Stafford, Virginia</u> ZIP + 4 ► <u>22556-1838</u>		
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)?	42b	✓
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.?	42c	✓
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	44	✓
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	45	✓

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 | ✓ |
| 47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | ✓ |
| 48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | ✓ |
| 49a Did the organization make any transfers to an exempt non-charitable related organization? | 49a | ✓ |
| 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 *Cynthia Harris* Date *12-11-10*

Type or print name and title **Cynthia Harris**

Paid Preparer's Use Only

Preparer's signature _____ Date _____ Check if self-employed ☐ Preparer's Identifying Number (See instructions) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 _____ EIN _____ Phone no. () _____

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

Garrisonville Elementary School PTO

Employer identification number

35 2324073

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 33⅓% support test—2008. If the organization did not check the box on line 13, and line 14 is 33⅓% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33⅓% support test—2007. If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓% 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

Section A. Public Support			ending 8/08		ending 8/09	
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.")				3871	10782	14653
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				0	20,421	20421
3 Gross receipts from activities that are not an unrelated trade or business under section 513				16,198	28789	44987
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				0	0	
5 The value of services or facilities furnished by a governmental unit to the organization without charge				0	0	
6 Total. Add lines 1-5				20,069	59,992	80061
7a Amounts included on lines 1, 2, and 3 received from disqualified persons				0	0	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000				0	0	
c Add lines 7a and 7b				0	0	
8 Public support (Subtract line 7c from line 6.)						80,061

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				20,069	59,992	80,061
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				107	170	277
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				0	0	
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on				0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				0	0	
13 Total support. (Add lines 9, 10c, 11, and 12.)						80,338

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 33⅓ % support tests—2008. If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33⅓ % support tests—2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, 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)

not applicable

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.** Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

2008

Open To Public Inspection

Name of the organization

Garrisonville Elementary School Parent Teacher Organization

Employer identification number

35 : 2324073

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a** ☐ Mail solicitations
b ☐ Email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☒ Special fundraising events

- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☒ No

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

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
not applicable						
Total ►						

- 3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Virginia§ 18.2-340.23. Organizations exempt from certain permit: Gross receipts must be under \$25,000 for gaming in a 12 month period in order to be exempt from certain permits or financial reporting.

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 Fall Festival (event type)	(b) Event #2 Cherrydale (event type)	(c) Other Events (total number)	(d) Total Events (Add col. (a) through col (c))
Revenue	1 Gross receipts	9908	8836		18744
	2 Less: Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	9908	8836		18744
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	1949	4305		6254
	8 Direct expense summary. Add lines 4 through 7 in column (d) ▶				(6254)
	9 Net income summary. Combine lines 3 and 8 in column (d) ▶				12490

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	5681			5681
	2 Cash prizes	109			109
Direct Expenses	3 Non-cash prizes	239			239
	4 Rent/facility costs				
	5 Other direct expenses	446			446
	6 Volunteer labor	☒ Yes 100 % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				(794)
	8 Net gaming income summary. Combine lines 1 and 7 in column (d) ▶				4887

		Yes	No
9 Enter the state(s) in which the organization operates gaming activities: <u>Virginia</u>			
a Is the organization licensed to operate gaming activities in each of these states?	9a		✓
b If "No," Explain: <u>The Garrisonville Elementary School PTO's gross receipts for gaming are under \$25,000 in 12mos.</u> <u>§ 18.2-340.23. Organizations exempt from certain permit if under \$25,000 in a 12 month period.</u>			
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		✓

		Yes	No
13	Indicate the percentage of gaming activity operated in:		
a	The organization's facility 13a 100 %		
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 ▶ Cynthia Harris, PTO Treasurer		
	Address ▶ 100 Wood Drive, Stafford VA 22556		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	✓
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____		
c	If "Yes," enter name and address:		
	Name ▶ _____		
	Address ▶ _____		
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?	17a	✓
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 ▶ \$ _____		

Line 10 Schedule Attachment
Grants and similar amounts paid

The majority of the monies represented on line 10 is for the enhancement of education for the elementary students at Garrisonville Elementary

Educational Technology: 12,360

Date	Check : Amount	Payee	Description
16-Jun 2343	7384	CDW Government Inc.	13 portable document cameras
16-Jun 2344	4976	Street & Company	4 Smart Boards

Total 12360 Technology

\$5,478

School Programs:

30-Mar 2315	737.97	Creative Product Sourcing Inc (Dare Shirts for all 5th Graders)	
19-May 2330	50	Grafton Village Elementary School (Dare Day Donation)	
Total	787.97	Dare	
9-Feb 2299	99.5	Margaret Brent Elementary 10 music shirts @ 9.50 for Fine Arts Festival	
	99.5	Music	
11-Feb 2301	874.3	Scholastic Book Club	Past due bill for book order placed on 4/25/08
	874.3	Reading Lab	
28-May 2331	-131.59	Rhode Island Novelty	Library--Accelerated Reader Prizes
28-May 2332	-111.03	Oriental Trading Company	Library--Accelerated Reader Prizes
28-May 2333	-120.05	Toy Depot	Library--Accelerated Reader Prizes
Total	-362.67	Accelerated Reader Prizes	
25-Sep 2256	775	Magician Joe Romano	Magic Reading Show
5-Nov 2276	275	Jamestown-Yorktown	4th Grade History Program
18-Dec 2292	272	Barbara Reese	1st Grade Hands on History
12-Feb 2302	800	Bluemont Concert	Sparky & Rhonda Rucker Programs
19-Mar 2311	1075	Reptile World	Reptile World Show held during Gator Week
	3197	Assembly Programs	
12-May 2327	156.69	Career Kids, LLC	Mrs. Rueter (school counselor) ordered for her kids
	156.69	Guidance	
	14,956		

School Expenses:

2-Sep 2241	\$1,221.25	Premier Agendas, Inc. 325 Agendas & Pagefinders for k-5	
23-Sep 2254	\$1,869.00	Premier Agendas, Inc. balance on Agendas for k-5	
	\$3,090.25	Agendas	
22-Sep 2253	\$218.60	Xerox Capital	August Copier Rental
23-Oct 2264	\$218.60	Xerox Capital	September Copier Rental
12-Nov 2278	\$218.60	Xerox Capital	October Copier Rental

2-Dec	2283	\$218.60	Xerox Capital	November Copier Rental
5-Dec	2285	\$175.82	Ricoh Americas Corp	November 15-December 14 Copier Rental
19-Dec	2295	\$175.82	Ricoh Americas Corp	December 15-January 14 Copier Rental
9-Jan	depos	(\$147.64)	Xerox Capital	Reimbursement for Overpayment
15-Jan	2297	\$175.82	Ricoh Americas Corp	January 15-February 14 Copier Rental
2-Apr	2316	\$175.82	Ricoh Americas Corp	February 15-March 14
28-Apr	2319	175.82	Ricoh Americas Corp.	March 15-April 14 Office Copier
12-May	2326	\$175.82	Ricoh Americas Corp.	May 15-June 14 office Copier
13-May	2328	\$175.82	Ricoh Americas Corp.	April 15-May 14 Office Copier
11-Jun	2338	\$175.82	Ricoh Americas Corp.	June 15-July 14 Office Copier
30-Jul	2348	\$175.82	Ricoh Americas Corp	July 15-August 14 Office Copier
8-Jun	2337	<u>\$2,309.14</u>	Office Copier	
15-Jun	2341	225.9	Party HQ	Field Day snow cone machine/mixes
17-Jun	2345	\$60.74	Merri Chapman	Reimbursement for bubbles/toys for Field Day
		\$254.80	Ben Sargent	Reimbursement for Walmart Field Day Items
		<u>\$541.44</u>	Field Day	
26-Feb	2306	\$29.50	SCSN	reimbursement for overdue lunch charges for Tanja Davis
16-Jun	2342	<u>50.05</u>	SCSN	Unpaid Cafeteria Charges
		\$79.55	Overdue lunch charges	
9-Feb	2300	\$7,000.00	Garrisonville ES	3000-paper/4000-mailroom copier lease
		<u>\$7,000.00</u>	Paper/mailroom copier	
26-Jan	2298	\$187.04	Ben Sargent	Reimbursement for student prizes/Jump Rope for Heart
		<u>\$187.04</u>	Jump Rope for Heart	
18-Dec	2294	350	Bob Evans	Breakfast Food for SAC Breakfast on 12/19
28-Apr	2320	410	Lori Rys	Reimbursement for Staff Appreciation Wk gift cards from Walmart
8-May	2322	180	Bruster's Real Ice Cream	Staff Appreciation Week
17-Jun	2346	566.24	Honey Baked Ham	Staff End of the Year Lunch
		<u>1506.24</u>	Staff Appreciation	
30-Mar	2314	164.44	Oriental Trading Company	Gatorweek Beads 2009
		164.44	Gator Week	
		\$10.50	Stafford County School of Nutrition for OJ for Gotcha breakfast	
		<u>\$67.54</u>	ice cream for ice cream social--Angela Sparks reimbursed	
		<u>\$78.04</u>	Other	
		12360	technology	
		14956	school expenses	
		5478	school programs	
		<u>32794</u>	line 10	