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Department of the Treasury Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009 Open to Public

	- Torona		The organization may have to use a copy of this feturi to satisfy state		ements	Inspection
<u>A</u>	For the 200	)9 calendai	year, or tax year beginning $01/01/10$ , and ending $06/30/10$			
В	Check if applica		To Maille of Organization The Telephone Teleph	L	D Empl	oyer identification number
$\mathbf{X}$	Address chang	e use (R label e	il Arnieric Hoogrer Cimp			
$\overline{\Box}$	Name change	print	1 5		31-	-1051435
님	maine change	type	·	Room/suite		hone number
$\sqcup$	Initial return	See	2708 N 475 W	Toonvoule		5-463-5566
	Termination	Specif	ic			
$\equiv$		Instru	· ·		G Gross rec	eipts \$ 24,743
$\sqcup$	Amended retur	1				
	Application per	iong 1	me and address of principal officer		H(a) Is this	a group return for
			ret A Hawks CPA	ł	affiliat	es? Yes X No
		2	708 N 475 W		H(b) Are al includ	ed? Yes No
_		W	est Lafayette IN 47906	Į.	If "No.	attach a list (see instructions)
$\overline{}$	Tax-exempt		X 501(c) ( 3 ) ◀ (insert no ) 4947(a)(1) or 527			,,
	Website:				H(c) Groun	exemption number
	Type of organi		Corporation Trust X Association Other ▶ L Ye		83	
*****				ear of formation 15	,05	M State of legal domicile IN
	art I	Summ				<del></del>
	1		e the organization's mission or most significant activities			
ø	1		ort the athletic programs at William Henry Harri	-		1
a	t	hrough	grants for equipment and facility maintenance a	nd upgrad	es.	
Ĕ						
ĕ	2 Che	ck this box	▶ ☐ if the organization discontinued its operations or disposed of more than 25°	% of its net asse	ets	
Ö			ng members of the governing body (Part VI, line 1a)		3	4
Activities & Governance	1		ependent voting members of the governing body (Part VI, line 1b)		4	16
≍≌					5	0
===	1		f employees (Part V, line 2a)		<del></del>	
¥	4		f volunteers (estimate if necessary)		6	100
. O	7a Tota	il gross uni	related business revenue from Part VIII, column (C), line 12		7a	
8	b Net	unrelated l	ousiness taxable income from Form 990-T, line 34		7b	0
?	i			Prior Year		Current Year
2 o	8 Con	tributions a	and grants (Part VIII, line 1h) RECEIVED			3,860
<u> </u>	9 Prog	ram servi	e revenue (Part VIII, line 2g)			
Revenue	10 Inve	stment inc	ome (Part VIII, column (A), lines 3, 4, and 7d)			312
2 <b>&amp;</b>	11 Othe	er revenue	(Part VIII, column (A), lines 5, 6d, 8c, 92, 10c, 41/4/14 2 3 2011			8,460
<b>-</b>				·		12,632
5	13 Grai	nts and sin	nilar amounts paid (Part IX, column (A), lines 1060EN, UT			29,752
<b>3</b>	14 Bon	efite naid t	o or for members (Part IX, column (A), Inno-4) OGDEN, UT	<del></del>		
	1		compensation, employee benefits (Part IX, column (A), lines 5–10)	<del>-</del>		
Expenses	15 Sala	-				
ű	16a Prot		ndraising fees (Part IX, column (A), line 11e)			<del></del>
×	b Tota		ng expenses (Part IX, column (D), line 25) ▶			
ш	17 Othe	er expense	s (Part IX, column (A), lines 11a–11d, 11f–24f)			419
	18 Tota	I expenses	Add lines 13–17 (must equal Part IX, column (A), line 25)			30,171
	19 Rev	enue less	expenses Subtract line 18 from line 12		l	
Net Assets or Fund Balances				Beginning of Curre		End of Year
sets	20 Tota	ıl assets (F	art X, line 16)	80	,451	54,627
d As	21 Tota	l liabilities	(Part X, line 26)			
꽃등	22 Net	assets or f	und balances Subtract line 21 from line 20	80	,451	54,627
	art II		ure Block			
			alties of perjury, I declare that I have examined this return, including accompanying schedules a	and statements, an	d to the be	st of my knowledge
		and belief	it is true, correct, and complete Declaration of preparer (other than officer) is based on all infor	mation of which pr	eparer has	any knowledge
Sig	.n	<b>.</b>	Bat Adlences		1 5	lictio
_		<b>—</b>				
He	re	-	ture of officer		Date	
			ret A Hawks Treasu	irer		
		Type_	or print name and title			<del></del>
_		Preparer's	Date	Check if		Preparer's identifying number (see instructions)
Pai		signature	Bret A Hawks, CPA 05/16	/11 self- employe	d▶ 「	P00161410
	eparer's		Heman Lawson Hawks LLP	· 1	EIN D	25 1556461
Us	e Only		ne (or yours		<del></del>	<u> </u>
	-	If self-emp			Phone	765-463-5566
			Mese Barayeste, In 17500 1152		no 🕨	
			return with the preparer shown above? (see instructions)			X Yes No
For DAA	Privacy A	ct and Pa	erwork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2009)

 4d	Other program services. (Describe in S	chedule O)		<del></del>
	(Expenses \$	including grants of \$	) (Revenue \$	
4e	Total program service expenses ▶	29,752		
				Form <b>990</b> (2009)
				,

Pa	rt IV Checklist of Required Schedules			
	,		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	<del></del>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			v
	candidates for public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	ا ہ		v
	Schedule C, Part II	4		<u> </u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	ا ہ		
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"	6		x
_	complete Schedule D, Part I	▝		<u>~</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II			
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	8		x
•	complete Schedule D, Part III  Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
9	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	$\neg$		
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12		X
	Schedule D, Parts XI, XII, and XIII  Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	12		
12A	Tras the digamental monded in contentation, independent and in contentation in contentation in contentation, independent and in contentation i			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
13		14a		X
14a b	The state of the s			
U	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			_
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	1		l <u></u>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	<del>                                     </del>	<u>_X</u> _
19 .				<b>.</b>
	If "Yes," complete Schedule G, Part III	19	-	X
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20 Form	, <u>99</u> n	(2009)
		, 0,1		(=000)

		i	Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations		""	•
	in the United States on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21	X	[
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	Ï	Í	
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1		!
	If "Yes," complete Schedule L, Part III	27_		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29_		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		i i	ľ
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			1
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		1	
	19? Note. All Form 990 filers are required to complete Schedule O	38_	<u>L</u> _	X
		Forr	n 990	(2009)

Form 990 (2009) William Henry Harrison High School 31-1051435

Part V Statements Regarding Other IRS Filings and Tax Compliance

<del></del>	Otationical Regarding Other Into Finings and Tax Compilance				 	,	
10	Enter the number reported in Pay 2 of Form 4000. Annual Community of					Yes	No
14	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	١. ا	1.	^			
b	U.S. Information Returns. Enter -0- if not applicable	_1a	_	<u>0</u> _	 ł		-
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	_1b	_	0	 {		
С	to tollario and to	portabl	le				7.
22	gaming (gambling) winnings to prize winners?	1 1	ı		1c	-	X
24	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		١,	0			
<b>h</b>	Statements, filed for the calendar year ending with or within the year covered by this return	2a	<u>'</u>	<u> </u>	 1	i	l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return.	ns /			2b	<u> </u>	-
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by					
- Uu	this return?	ц Бу			3a		x
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a		authori	ıtv		30	-	
-	over, a financial account in a foreign country (such as a bank account, securities account, or other fin		-				
	account)?	anciai			4a	]	x
b	If "Yes," enter the name of the foreign country				70		-
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Rank					
	and Financial Accounts	Dank					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?			5b		x
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega						
-	Prohibited Tax Shelter Transaction?				5c		ĺ
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	е					
	organization solicit any contributions that were not tax deductible?				6a	!	х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				,	
	gifts were not tax deductible?				6b		l
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	joods					
	and services provided to the payor?				7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s					
	required to file Form 8282?				7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	<u>L_</u>				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	al				
	benefit contract?				7e_		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?			7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				7g		Х
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C	as					
	required?				7h		X
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
_	organization, have excess business holdings at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the organization make any taxable distributions under section 4966?				9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter	ا ءمه ا	ı				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	<u> </u>				
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	L	-			
11	Section 501(c)(12) organizations. Enter.	-a				,	
_a_ h		11a	$\vdash$				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )	116					
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		<u> </u>		 12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	10417 12b	1		120		-
	in 100, onto the amount of tax-exempt interest received of accided during the year	120	L		 	أربيسيين	

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			
		<u></u>	Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			.,
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X_
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		v
_	of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	1		
	the year by the following		v	ĺ
a	The governing body?	8a	X	—
b	Each committee with authority to act on behalf of the governing body?	8b		<del></del>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			x
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Ke	venue Code.)	-	V	
	Box 11 and a standard books to be a box above to a section of the	10a	Yes	No X
10a	Does the organization have local chapters, branches, or affiliates?	IVa		<u> </u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	100		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	11	х	
44-	form?			
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a		X
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	120		<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	12b		
_	rise to conflicts?  Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	125	<del></del>	$\overline{}$
С	describe in Schedule O how this is done	12c		
42	Does the organization have a written whistleblower policy?	13		X
13	Does the organization have a written document retention and destruction policy?	14		X
14 15	Did the process for determining compensation of the following persons include a review and approval by			
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
_	The organization's CEO, Executive Director, or top management official	15a		X_
a b	Other officers or key employees of the organization	15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )	102		
16a	The second secon			
IVA	with a taxable entity during the year?	16a	ì	x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate			
U	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b	1	
Sec	ction C. Disclosure	•	•	
17	List the states with which a copy of this Form 990 is required to be filed ▶ IN			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
. •	available for public inspection. Indicate how you make these available. Check all that apply		'	_
-	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
-	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization ▶ Heman Lawson Hawks LLP 2522 N Salisbury St			
W	est Lafavette IN 47906	765-46	3 - 5	566

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

X Check this box if the organizatio	n did not compe	nsate	e an	y cui	rrent	offic	er, c	lirector, or trustee		
(A) Name and Title	(B) Average	Posi	tion (		C) k all t	that a	(ylgg	(D) Reportable	( <b>E)</b> Reportable	( <b>F</b> ) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Kurt Williams			<del>                                     </del>			$\vdash$	<del> </del>			
President	1.00			X			ļ	0	0	0
Shawn Krauss										
Vice President	1.00		1	X	1	[		0	0	·
Stephanie Willis				-						
Secretary	1.00			X				0	0	0
Bret Hawks	=				Г					
Treasurer	4.00			x				0	0	0
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Pa	rt VII Section A. Office	ers, Directors, Tru	stee	s, Ke	y Er	nplo	yees	s, an	nd Highest Compensated	Employees (continued)			
	(A) Name and Title	(B) Average hours per			chec	_	that a		(D) Reportable compensation	(E) Reportable compensation	Estu	F) mated	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	ol compe fror organ and r	ther ensation in the sization related szations	
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1b 2	Total Total number of individuals	(including but not l		ed to	thos	e lis	ted a	bov	e) who received more than	\$100,000 in			
	reportable compensation from	•		_								1 1	
3	Did the organization list any employee on line 1a? If "Ye For any individual listed on the organization and related	es," complete Sche	dule of re	J for	suci able	h ind com	dividu ipens	ial satio	n and other compensation	from	3	Yes	X
5	individual  Did any person listed on lin services rendered to the or									г	5		<u>x</u> x
Sec	tion B. Independent Contra	ictors											
1	Complete this table for you compensation from the org	anization	ensa	ited i	ndep	end	lent o	onti			<del></del>	(C)	
	Name	(A) and business address							Descrip	(B) thon of services		(C) Compensati	on
								-					
	<del></del>		<u>.</u>						and leader of the control of the con				
DAA	Total number of independe more than \$100,000 in com						ed to	tho	se listed above) who receiv			o rm <b>990</b>	(2009)

Statement of Revenue (B) Related or (C) Unrelated (D) Revenue (A) Total revenue exempt function excluded from tax under sections 512, 513, or 514 business revenue revenue Contributions, gifts, grants and other similar amounts 1a Federated campaigns 3,035 1b b Membership dues 1c c Fundraising events 1đ d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 825 1f g Noncash contributions included in lines 1a-1f 3,860 h Total. Add lines 1a-1f Program Service Revenue Busn. Code 2a b f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 312 312 other similar amounts) Income from investment of tax-exempt bond proceeds ▶ Royalties (ı) Real (II) Personal 6a Gross Rents **b** Less rental exps Rental inc or (loss)  $\blacktriangleright$ Net rental income or (loss) Gross amount from (i) Securities (II) Other sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) ▶ d Net gain or (loss) 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV. line 18 b Less direct expenses c Net income or (loss) from fundraising events  $\triangleright$ 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less 20,571 returns and allowances 12,111 b Less. cost of goods sold 8,460 8,460 c Net income or (loss) from sales of inventory Busn. Code Miscellaneous Revenue 11a C d All other revenue Total. Add lines 11a-11d 0 0 8,772 12,632 Total Revenue. See instructions

Part IX Statement of Functional Expenses

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

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

	All other organizations must be			(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	29,752	29,752		
	Grants and other assistance to individuals in				
	the U S See Part IV, line 22				
	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				<u></u>
4	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees				<del></del>
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				<del></del>
	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
	Legal				
	Accounting				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees		ļ <u> </u>		<del></del>
g	Other		<u> </u>		
12	Advertising and promotion	208		208	· · · · · · · · · · · · · · · · · · ·
13	Office expenses	211		211	
14	Information technology			-	
15	Royalties			<del></del>	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	ļ <del> </del>	<u> </u>		
19	Conferences, conventions, and meetings	ļ	<del> </del>		<del></del>
20	Interest	ļ	-		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	<u> </u>	-		
23	Insurance				
-	<b>O</b> II				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )	·	1		
a h		<del></del>			
b c					
d					
a .					
f					
25	Total functional expenses. Add lines 1 through 24f	30,171	29,752	419	
26	Joint costs. Check here ▶ If following				_
-	SOP 98-2 Complete this line only if the		<b>\</b>		1
	organization reported in column (B) joint costs from a combined educational campaign and	Ί			1
	fundraising solicitation	<u></u>	<u> </u>	<u></u>	Form <b>990</b> (2009)
DAA					Form 990 (2009)

P	art X	Balance Sheet				rage r
				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing		69,351	1	54,627
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors,	trustees, key			
		employees, and highest compensated employees Com	plete Part II of	[		
		Schedule L			5	
	6	Receivables from other disqualified persons (as defined	under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(	(B) Complete			
		Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net			7	
SS	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges			9	<del></del>
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	ь	Less: accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities			11	· <del></del>
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets		14	<del></del>	
	15	Other assets See Part IV, line 11	11,100	15		
	16	Total assets. Add lines 1 through 15 (must equal line 34	80,451	16	54,627	
	17	Accounts payable and accrued expenses	·/		17	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
Ø	21	Escrow or custodial account liability. Complete Part IV o	f Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, truste				<del></del>
豆		employees, highest compensated employees, and disqu			1	
<u>.e</u>		persons Complete Part II of Schedule L	idiiiiod		22	
	23	Secured mortgages and notes payable to unrelated third	Inarties		23	
	24	Unsecured notes and loans payable to unrelated third pa	•		24	
	25	Other liabilities Complete Part X of Schedule D	271100		25	
	26	Total liabilities. Add lines 17 through 25			26	<del></del>
Ŋ		Organizations that follow SFAS 117, check here ▶ X	and			
Balances		complete lines 27 through 29, and lines 33 and 34.				
a	27	Unrestricted net assets		80,451	27	54,627
Ba	28	Temporarily restricted net assets			28	
₽	29	Permanently restricted net assets			29	
5	-*	Organizations that do not follow SFAS 117, check her	ro <b>&gt;</b> [			<del></del>
느	ĺ	and complete lines 30 through 34.				
0	30	Capital stock or trust principal, or current funds			30	
ie i	31	Paid-in or capital surplus, or land, building, or equipment	t fund		31	
SS	32	Retained earnings, endowment, accumulated income, or		<del></del>	32	<del></del>
Net Assets or Fund	33	Total net assets or fund balances	i onici junus	80,451	33	54,627
Š	34	Total liabilities and net assets/fund balances		80,451	34	54,627

Form	990 (2009) William Henry Harrison High School 31-1051435		Pag	ge <b>12</b>
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
h	If "Ves." did the organization undergo the required audit or audits? If the organization did not undergo the	1 1	1	

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2009)

**SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Internal Re	venue Service	► At	tach to Form 990 or Form 990	-EZ. P	See sepa	rate ins	truction	)s. 		Inspection
	he organizatio	Milliam Henr Athletic Boo	ry Harrison High Oster Club	Sch	ool		-		oyer ide - 105	ntification number 1435
Part I	Reas	on for Public Charity	Status (All organizations	s must	complet	te this	part.)	See ir	<u>ıstruct</u>	ions.
The organ	nization is not	a private foundation becaus	se it is (For lines 1 through 11,	check onl	y one box	:)				
1 📙	A church, cor	nvention of churches, or ass	sociation of churches described	ın sectio	n 170(b)(ʻ	I)(A)(i).				
2 📙	A school des	cribed in section 170(b)(1)(	(A)(ii). (Attach Schedule E)							
3 📙	A hospital or	a cooperative hospital serv	ice organization described in se	ction 170	(b)(1)(A)(	iii).				
4	A medical res	search organization operate	d in conjunction with a hospital	described	l ın sectio	n 170(b	)(1)(A)(i	ii). Ente	er the ho	spital's name,
	city, and state	•								
5	An organizati	on operated for the benefit	of a college or university owned	or operat	ted by a g	overnme	ental uni	t descri	bed in	
_	section 170(	b)(1)(A)(iv). (Complete Part	: 11 )							
6	A federal, sta	te, or local government or g	governmental unit described in s	ection 17	70(b)(1)(A	)(v).				
7 📙	An organizati	on that normally receives a	substantial part of its support fr	om a gov	ernmenta	l unit or	from the	genera	al public	
<u></u>		section 170(b)(1)(A)(vi). (C	·							
8 📙	-		170(b)(1)(A)(vi). (Complete Part							
9		•	1) more than 33 1/3 % of its sup						_	oss
	•		npt functions—subject to certair	•		•				
		<u> </u>	nd unrelated business taxable ii				() from b	usines	ses	
$\Box$	•	•	30, 1975 See section 509(a)(2)			•				
10	•	•	exclusively to test for public saf	•				445	_	
11 X	-	-	exclusively for the benefit of, to							
			ted organizations described in s						Section	
			the type of supporting organizat $\mathbf{c} = \mathbf{X}$			d d		e III–OI	hor	
e X	a Type		ganization is not controlled direction							
e A	-	•	and other than one or more pu	-						1
		ection 509(a)(2)	and other than one of more pu	biloty sup	ported org	jumzano	115 4000	iibca iii	000000	
f		, ,, ,	ermination from the IRS that it is	a Type I	Type II	or Type	III suppe	ortina		
•	•	check this box		, , ,	, .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , ,				
g	-		ition accepted any gift or contrib	ution fron	n anv of ti	ne				
8	following per		and a company garder community		,	-				
	• .		ontrols, either alone or together	with pers	ons descr	bed in (	n)			Yes No
	• •	•	of the supported organization?	•		•	•			11g(i) X
	• •	member of a person descri								11g(ii) X
			described in (i) or (ii) above?							11g(iii) X
_ h	Provide the f	ollowing information about	the supported organization(s)							
(i) Name	e of supported	(ii) EIN	(iii) Type of organization		organization				ls the	(vii) Amount of
org	anization		(described on lines 1–9 above or IRC section		isted in your document?		nization in of your	organizat (i) organi	zed in the	support
			(see instructions))	governing	document		oort?		S?	
	. <u>.                                   </u>			Yes	No	Yes	No	Yes	No	
Will	iam Her	ry Harrison H	igh School							
		35-1073190		<u> </u>	<u> </u>	X		X	1	<u>29,752</u>
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For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

29,752

Schedule A (Form 990 or 990-EZ) 2009 William Henry Harrison High School 31-1051435 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (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 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 12 Gross receipts from related activities, etc. (see instructions) 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 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 33 1/3 % support test-2009. 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 33 1/3 % support test—2008. 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—2009. 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 10%-facts-and-circumstances test-2008. 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 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Pa	edule A (Form 990 or 990-EZ) 2009 Wil	lliam Hen:	ry Harris	on High S	chool 31	L-1051435	Page 3
	iff III Support Schedule for O	rganizations I	Described in S	ection 509(a)	(2)		
	(Complete only if you che	ecked the box	on line 9 of Pa	art I.)		·	
	tion A. Public Support						
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")		;				
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						
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 7a	Total. Add lines 1 through 5  Amounts included on lines 1, 2, and 3	<del></del>					<del></del>
	received from disqualified persons					<u> </u>	
b	Amounts included on lines 2 and 3 received				ł	1	
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year					1 1	
С	Add lines 7a and 7b	<del></del>			<u> </u>		
8	Public support (Subtract line 7c from	-,					
	line 6)						·
	tion B. Total Support		,	<del>,                                     </del>		<del>,</del>	
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				<del></del>	<del> </del>	<del></del>
l0a	Gross income from interest, dividends,			ľ	ł	1	
	payments received on securities loans, rents, royalties and income from similar sources						
b	rents, royalties and income from similar						
b	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses						
	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly						
11 12	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11,						
12	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)						
12	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the	-	t, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	
12	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop here	9		urth, or fifth tax yea	ar as a section 501	I(c)(3)	<b>&gt;</b>
12 13 14	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public St	e Ipport Percen	tage		ar as a section 501	(c)(3)	<b>▶</b> [
112 13 14 Sec	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop here	pport Percen , column (f) divide	tage d by line 13, colum		ar as a section 501		<b>▶</b> □  %  %
11 12 13 14 15 16	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public St.	e Ipport Percen , column (f) divide edule A, Part III, lii	tage d by line 13, colum ne 15		ar as a section 501	15	
12 13 14 15 16 Sec	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public St.  Public support percentage for 2009 (line 8)  Public support percentage from 2008 Schettion D. Computation of Investme	ipport Percen , column (f) divide edule A, Part III, liu nt Income Pe ine-10c, column (f	tage d by line 13, colum ne 15 rcentage ) divided by line 13	ın (f))	ar as a section 501	15 16	%
12   13   14   15   16   17_	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schetion D. Computation of Investme  Investment income percentage from 2008 (linestment income percentage from 2008)	ipport Percen , column (f) divide edule A, Part III, III nt Income Perine-10c, column (f) Schedule A, Part	tage d by line 13, columne 15 rcentage d divided by line 13	n (f))		15 16 17 18	
11 12 13 14 Sec 16 Sec	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public Supublic support percentage for 2009 (line 8 Public support percentage from 2008 Schetion D. Computation of Investme Investment income percentage from 2008 33 1/3 % support tests—2009. If the organization of tests—2009. If the organization is support tests—2009. If the organization of tests—2009. If the organization is support tests—2009.	ipport Percen , column (f) divide edule A, Part III, III nt Income Percenter-10c, column (f) Schedule A, Part inization did not chi	tage d by line 13, columne 15 rcentage d divided by line 13 III, line 17 reck the box on line	n (f)) , column (f)) = 14, and line 15 is	s more than 33 1/3	15 16 17 18 %, and line	% % %
12   13   14   15   16   17_	rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (Add lines 9, 10c, 11, and 12)  First five years. If the Form 990 is for the organization, check this box and stop heretion C. Computation of Public Support percentage for 2009 (line 8 Public support percentage from 2008 Schetion D. Computation of Investme  Investment income percentage from 2008 (linestment income percentage from 2008)	ipport Percen , column (f) divide edule A, Part III, III nt Income Per ine-10c, column (f) Schedule A, Part inization did not choox and stop here	tage d by line 13, columne 15 rcentage divided by line 13 lll, line 17 neck the box on line. The organization	n (f)) , column (f)) e 14, and line 15 is qualifies as a publ	s more than 33 1/3	15 16 17 18 %, and line anization	%

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

Page 4

Schedule A (Form 990 or 990-EZ) 2009 William Henry Harrison High School 31-1051435

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

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SCHEDULE

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990. 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

William Henry Harrison High School

General Information on Grants and Assistance Athletic Booster Club

Part

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

the selection criteria used to award the grants or assistance?

2009

OMB No 1545-0047

Open to Public Inspection

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X

☐ Yes

Employer identification number 31-1051435

Part # Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	co Governments an any recipient that recipient that recipient that see 1 990) if additional s	d Organi ceived m pace is r	rganizations in the United States. Complete if the organization answered "Yes" to ved more than \$5,000. Check this box if no one recipient received more than \$5,000 is is needed	nited States. Com Check this box if	plete if the org no one recipie	janization ans	wered "Yes" to lore than \$5,000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(d) Amount of cash grant (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Harrison High School 5701 N County Rd 50 W West Lafayette	35-1073190		29,752				Equipment/Maintenanc
2 Enter total number of section 501(c)(3) and government organizations	nment organizations						

Schedule I (Form 990) 2009

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

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Schedule I (ro						
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.	to Individuals in the (Form 990) if addition	• <b>United States</b> . Connal space is needed	nplete if the organiza	tion answered "Yes" to For	m 990, Part IV, line 22.
(a	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, Poscription of non-cash assistance FMV, appraisal, other)
Part IV	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	complete this part to p	provide the informati	ion required in Part I,	line 2, and any other addit	ional information.

#### **SCHEDULE O**

(Form 990)

**Supplemental Information to Form 990** 

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Internal Revenue Service
Name of the organization

Department of the Treasury

William Henry Harrison High School Athletic Booster Club

Employer identification number 31-1051435

Form 990, Part I, Line 6

Volunteers man the various concession stands that the various sports require at William Henry Harrison High School athletic events.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 Officers review the return and submit questions to the Treasurer.

Form 990, Part VI, Line 18 - No Public Disclosure Explanation Documents available for review upon request.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form (Rev January 2011) Department of the Treasury Internal Revenue Service

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

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

Do not comp	lete Part II unless you have already been granted an	automatic 3	3-month extension on a previously filed	l Form 886	8	
a corporation 8868 to reque	ing (e-file). You can electronically file Form 8868 if your required to file Form 990-T), or an additional (not autoest an extension of time to file any of the forms listed in	omatic) 3-m n Part I or F	onth extension of time You can electro Part II with the exception of Form 8870,	onically file Informatio	Form	
	ansfers Associated With Certain Personal Benefit Cor					
	For more details on the electronic filing of this form, v				ofits	
Part I	Automatic 3-Month Extension of Time		<del></del>			
Part I only	required to file Form 990-T and requesting an autom				.f. tum a	▶ 🗌
	orations (including 1120-C filers), partnerships, REMI	es, and trus	as must use Form 7004 to request an o	extension c	or unie	
to file income				F	!	
Type or print File by the	Name of exempt organization William Henry Harrison H: Athletic Booster Club				er identificatio	n number
due date for filing your return See	Number, street, and room or suite no. If a P.O. box 2708 N 475 W	k, see instru	ctions			
ınstructions	City, town or post office, state, and ZIP code For a West Lafayette IN	foreign add 47906				
Enter the Ret	urn code for the return that this application is for (file	a separate a	application for each return)			01
Application	l	Return	Application			Return
ls For		Code	ls For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990-B	3L	02	Form 1041-A			08
Form 990-E	Z	03	Form 4720			09
Form 990-P	F	04	Form 5227			10
Form 990-T	(sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T	(trust other than above)	06	Form 8870			12
Telephone If the orga If this is for the whole a list with the	are in the care of ▶ e No ▶ anization does not have an office or place of business or a Group Return, enter the organization's four digit of group, check this box ▶ ☐ If it is for part of names and EINs of all members the extension is for st an automatic 3-month (6 months for a corporation re	Group Exem	ed States, check this box option Number (GEN) check this box and atte	f this is ach		▶ []
until 0 for the c    X  2 If this ta	5/15/11 , to file the exempt organization return for calendar year or tax year beginning 01/01/10 , and ending 0 ax year entered in line 1 is for less than 12 months, change in accounting period	orn for the ore $06/30/$	ganization named above The extensio			
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, ondable credits. See instructions	or 6069, ente	er the tentative tax, less any	3a	\$	
b_lf_this_a	pplication is for Form 990-PF, 990-T, 4720; or 6069;	enter any re	fundable credits and			
estimat	ed tax payments made. Include any prior year overpa	yment allow	ved as a credit	3b	\$	
	e due. Subtract line 3b from line 3a Include your pay D coupon or, if required, by using EFTPS (Electronic					
instruct	ions			3с	\$	
Caution. If yo	ou are going to make an electronic fund withdrawal wi	th this Form	8868, see Form 8453-EO and Form 8	879-EO fo	r	

payment instructions

# Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Internal Revenue		▶ File a s	separate application for each return.		-		
		tomatic 3-Month Extension, complete	only Part I and check this box			<u> </u>	X
			nsion, complete only Part II (on page 2 of this for				
	=	· ·	utomatic 3-month extension on a previously filed F		3		
Part			Only submit original (no copies needed			<u> </u>	
A comoration	required to file	Form 990-T and requesting an automatic	ic 6-month extension—check this box and complet	A			
Part I only	reduited to me	rom 550-1 and requesting an automati				▶	
All other corpo	orations (includ	ing 1120-C filers), partnerships, REMICs	s, and trusts must use Form 7004 to request an ex	tension o	i		
	ome tax return	- · · · · · · · · · · · · · · · · · · ·	•				
Electronic Fil	ling (e-file). Ge	nerally, you can electronically file Form I	8868 if you want a 3-month automatic extension of	time to f	ìle		
one of the retu	ums noted beli	w (6 months for a corporation required to	o file Form 990-T). However, you cannot file Form	8868			
electronically i	if (1) you want	the additional (not automatic) 3-month e	xtension or (2) you file Farms 990-BL, 6069, or 88	70, grou	•		
returns, or a c	composite or co	nsolidated Form 990-T. Instead, you mu	ust submit the fully completed and signed page 2 (	Part II) of	Form		
8868. For mo	re details on th	e electronic filing of this form, visit www.i	irs gov/efile and click on e-file for Charities & Nonp	rofits			
Type or	Name of Ex	mpt Organization		Employ	er identifica	ation number	<u> </u>
print	Willia	m Henry Harrison Hig	gh School				
File by the	Athlet	ic Booster Club		31-1	051435	<u>;                                    </u>	
due date for filing your		et, and room or suite no. If a P O box, s	see Instructions.				
return, See Instructions		post office, state, and ZIP code. For a fe	oreign address, see instructions				
		· _	47906				
Check type of		lled (file a separate application for each	return).				
X Form 99	90	□ Fo	orm 990-T (corporation)		For	m 4720	
Form 99	90-BL	☐ Fo	orm 990-T (sec. 401(a) or 408(a) trust)		☐ For	m 5227	
Form 99	90-EZ	☐ Fo	om 990-T (trust other than above)		For	m 6069	
Form 99	90-PF	☐ Fo	orm 1041-A		Fan	m 8870	
If this is for the whole galist with the until Offer the contractions of the contraction	anization does or a Group Ret group, check to names and Ell st an automatic 2/15/11 organization's i	irn, enter the organization's four digit Gri is box	the group, check this box  and a  graph of the form 990-T) extension of time  for the organization named above. The extension			•	
			Initial return	accoun	ting period		
		Form 990-BL, 990-PF, 990-T, 4720, or	6069, enter the tentative tax.	20	s		
		e credits. See instructions. Form 990-PF or 990-T, enter any refund	dable credite and actimated toy	3a	<u> </u>		
-	•	rom 990-Pr of 990-1, enter any return de any prior year overpayment allowed a		3ь	S		
		t line 3b from line 3a. Include your paym		\$318	<del></del>		
		on or, if required, by using EFTPS (Elect					
•	). See instruct	• •	mente i andiar i anti agricult	3c	s		
			this Form 8868, see Form 8453-EO and Form 887				
for payment in		The second state of the se					
		ork Reduction Act Notice, see Instruc	tions.		Form	8868 (Rov. 4-	-2009)