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

2009

OMB No 1545-1150

Open to Public Inspection

, 20 10

Department of the Treasury ternal Revenue Service

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

Sponsoning 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 \$500,000 and total assets less than \$1,250,000 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.

, 2009, and ending A For the 2009 calendar year, or tax year beginning July 1 June 30

В	Check	1000						ployer identification number				
	Addre	ss change	use IRS label or		colin Creek Elementary PTA			3	2-0198827			
		change	print or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Teleph						lephone number			
¥	Initial i		type. See	2	100 Evergreen Mills Road	571-246-1808						
H			Specific		ty or town, state or country, and ZIP + 4		F Grou	ın Exe	mption			
H		ded return ation pending	Instruc- tions.	- 1	esburg, VA, 20175-6794			ber	•	3229		
ш	- ' '	<del></del>		_	ons and 4947(a)(1) nonexempt charitable trusts must attach	G Accou				Accrual		
	• 3	ection 30 f(c)(3)			eted Schedule A (Form 990 or 990-EZ).	1	(specify)		⊕ Oasıı			
_		<del></del>							organization			
	W-h	site: ▶ N/A							chedule B (			
			abaak a		one) — 🗸 501(c) ( 3 ) ◀ (insert no.) 🗌 4947(a)(1) or 🔲 527		Z, or 99		CHEQUIE D (	ruin <del>33</del> 0,		
_	•				<del> </del>			<del></del>	45 60			
K	Chec				on is not a section 509(a)(3) supporting organization and its gross rec					5,000. A		
-					n is not required, but if the organization chooses to file a return, be s			ele re	turri.	£4.02E		
		nes 5b, 6b, and 7	b, to line	ne 9	to determine gross receipts, if \$500,000 or more, file Form 990 instead of uses, and Changes in Net Assets or Fund Balances (	(See the	inctnu	otion	s for Dort	51,035		
	art							_	Silviran			
	1			-	grants, and similar amounts received			1_		9,821		
	2	-			enue including government fees and contracts			_2		0		
$\cong$	3	Membersh	iip dues	es a	nd assessments			3_		0		
70 IU	4							4		0		
	5	a Gross amo	ount fro	om	sale of assets other than inventory 5a		0					
₹4	-	b Less: cost	or othe	ner t	asis and sales expenses		0					
<b>≒</b>					ale of assets other than inventory (Subtract line 5b from line 5			5c		0		
و س	6	Special event	ts and act	ctivit	es (complete applicable parts of Schedule G). If any amount is from gaming, of	check here						
	<u> </u>	a Gross reve	enue (no	not i	ncluding \$ of contributions							
۾ ۾	<u> </u>	reported o	n line 1	1) .			41,214					
Ũ		<b>b</b> Less: direc	ct expe	ense	s other than fundraising expenses 6b		21,451					
		c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)						6с		19,763		
	7	a Gross sale	s of inv	nven	tory, less returns and allowances		0					
3		b Less: cost	of goo	ods	sold		0					
9	-	c Gross prof	fit or (lo	oss	from sales of inventory (Subtract line 7b from line 7a)			7c		0		
	8		-				)	8		0		
	9	Total reve	nue. A	Add	lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		. •	9		29,584		
	10	•			mounts paid (attach schedule)	<del></del>		10				
	11	Benefits pa	Benefits paid to or for members									
ď	12	Salaries, o	ther co	om	ensation, and employee benefits			12				
Fynancae	13	•			d other navments to independent contractors	. lö		13				
2	14				lities, and maintenance [0] NOV 1 9 2010	J. 185		14				
ŭ	1 15	-	-		s, postage, and shipping			15				
	16				cribe ▶ Statement 2	T -	,	16		10,689		
	17	•			d lines 10 through 16		. ▶	17		10,689		
_	40				r the year (Subtract line 17 from line 9)			18		18,895		
ŧ	19				palances at beginning of year (from line 27, column (A)) (mu							
Ü	<b>[</b> ]				ported on prior year's return)	-		19		19,075		
Not Accete	20	Other char	naes in	n ne	t assets or fund balances (attach explanation)			20				
Ž	21		-					21		37,970		
	art				. If Total assets on line 25, column (B) are \$1,250,000 or more			instea	ad of Form			
_					(See the instructions for Part II.)	_	unning of			d of year		
2	2	Cash savings	and in		stments		1	9,705	22	37,970		
		-							23	0		
		Other assets (	_						24	0		
		•			· · · · · · · · · · · · · · · · · · ·	<u> </u>	1:	9,705	<del></del>	37,970		
		Total liabilitie				<b>—</b>	<u>•</u> ·		26	0.,0.0		
	. <del>.</del> 7	Net assets or	r fund t	bal	ances (line 27 of column (B) must agree with line 21)		1	9,705		37,970		
_		· · · · · · · · · · · · · · · · · · ·				Cat No. 10				<b>0-EZ</b> (2009)		

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

Cat No. 106421



Попо	•
raye	-

	t III Statement of Program Servi				l.)		Expenses
Wha	t is the organization's primary exempt p	urpose? 1	undraising for PTA	activities			ared for section
Desc	cribe what was achieved in carrying of	out the org	anization's exempt purpos	ses. In a clear ar			)(3) and 501(c)(4) izations and section
manı	ner, describe the services provided, th	e number o	f persons benefited, and o	ther relevant info	mation for		a)(1) trusts; optional
each	program title.					for ot	hers.)
28	Statement 3						
	(Grants \$ ) If t	his amount	includes foreign grants, che	eck here	. ▶ 🗆	28a	10,689
29							
						·	
	(Grants \$ ) If t	his amount	includes foreign grants, cho	eck here	<u>. ▶ ⊔</u>	29a	
30	*						
			includes foreign grants, che	eck here	. ▶ ⊔	30a	
31	Other program services (attach schedu					ا ا	
			includes foreign grants, che			31a	40.000
	Total program service expenses (add					32	10,689
Par	t IV List of Officers, Directors, Truste	es, and key	(b) Title and average	(c) Compensation	(d) Contribution	ns to	(e) Expense
	(a) Name and address		hours per week devoted to position	(If not paid, enter -0)	employee benefit deferred comper	niane &	account and other allowances
Kalli	Williams		devoted to position	enter -0)	uelerieu curiper	Sauce	Other allowances
	10 Evergreen Mills Road Leesburg VA, 201	75	President: 5 hours	0		0	0
	nael Wright	7.5					
	0 Evergreen Mills Road Leesburg VA, 201	75	Treasurer: 2 Hours	0		0	0
Ali S							
	0 Evergreen Mills Road Leesburg VA, 201	75	Secretary: 2 Hours	0		0	0
				,			
				·			
				<del></del>	-		
_							
			_	. =-	_		······································

Part	Other Information (Note the statement requirements in the instructions for Part V.)			
_			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? 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 why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		<b>✓</b>
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets 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 0			
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 <b>or</b> were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on line 9			}
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b		<b>✓</b>
C	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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		<b>√</b>
41	List the states with which a copy of this return is filed. ▶ Virginia			
42a	The organization's books are in care of ▶ Michael Wright Telephone no. ▶	71-24	6-180	3
	Located at ► 20133 Gleedsville Road Leesburg, VA ZIP + 4 ►	20175	-8856	
b	, , , , , , , , , , , , , , , , , , , ,			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b		<u>√</u>
	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		<b>-</b>
-	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		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of			
	Form 990-EZ	44		1
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		1
	Con	, <b>99</b> f	)-F7	(2000)

Dono	
Page	•

rait	501(c)(3) organizations and section 494 and complete the tables for lines 50 and	47(a)(1) nonexempt ch	aritable trusts m	ust answer question	ons 46–	19b
	Did the organization engage in direct or indirect			or in opposition to	Y	es No
	candidates for public office? If "Yes," complete \$				46	<b>√</b>
	Did the organization engage in lobbying activities				47	<b>→</b> ✓
	ls the organization a school as described in section		•		48	<b>→</b>
	Did the organization make any transfers to an ex	·	=		49a	1
	If "Yes," was the related organization a section 5				496	<b>√</b>
	Complete this table for the organization's five high employees) who each received more than \$100,					
	employees) who each received more than \$100,0	(b) Title and average	(c) Compensation		···	pense
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation	accou	int and owances
None						
f	Total number of other employees paid over \$100	0.000	!		1	
	(a) Name and address of each independent contractor	paid more than \$100,000	(b)	Type of service	(c) Compo	ensation
None						
d	Total number of other independent contractors e	each receiving over \$100	000			
	The first of the first section					
	Under penalties of perjury, I declare that I have examine and belief, it is true, correct, and complete. Declaration	ed this return, including accomp of preparer (other than officer)	panying schedules and is based on all informat	statements, and to the beaton of which preparer has	st of my kn any knowle	owledge odge.
Sign				1		
Here	Signature of officer			Date		
	Type or print name and title					
Paid Propare	Preparer's signature	Date	Check if self- employed ▶	Preparer's identifying nur	nber (See ins	structions)
Prepare Use On	Firm's name (or			EIN ► Phone no. ►		
Mav the	e IRS discuss this return with the preparer shown	n above? See instruction	s		Yes [	□No
					m 990-l	

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

Department of the Treasury

Internal Revenue Service

### **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.

OMB No. 1545-0047

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

Open to Public Inspection

Employer identification number

Name of the organization 32 0198827 Sycolin Creek Elementary PTA Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% 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 33/3 % 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 e Dy 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). If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting f Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes Nο (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? 11g(i) 11g(ii) (ii) A family member of a person described in (i) above? . . . 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (vii) Amount of (i) Name of supported (ii) FIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the in col (i) listed in your organization (described on lines 1-9 the organization in organization in col support above or IRC section governing document? col (i) of your (ii) organized in the support? (see instructions)) Yes Yes Yes No

Total

	Support Schedule for Org (Complete only if you check					and	170(0)(1	)(A)(VI) 
	tion A. Public Support	(1) 000F	(h) 0000	4-) 0007	(4) 0000		0000	(A Total
Ca	endar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")			32,805	12,038		9.821	54,664
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			0	0		0	
3	The value of services or facilities furnished by a governmental unit to the organization without charge			0	0		0	
4	Total. Add lines 1 through 3			32,805	12,038		9,821	54,664
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							0
6	shown on line 11, column (f)							54,684
Sec	tion B. Total Support			L				
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
7	Amounts from line 4			32,805	12,938		9,821	54,684
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			0	0		0	0
9	Net income from unrelated business activities, whether or not the business is regularly carried on			0	0		0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		-	0	0		0	0
11	Total support. Add lines 7 through 10 .	L						54,684
12	Gross receipts from related activities, etc	•	•			12		41,214
13	First five years. If the Form 990 is for organization, check this box and stop he tion C. Computation of Public Su	re	<u> </u>	nd, third, fourth,				n 501(c)(3) 
<u>500</u> 14	Public support percentage for 2009 (line		_	1 column (fl)		14		%
15	Public support percentage from 2008 Scl			1, column (1))		15		%
16a	33½% support test—2009. If the organiand stop here. The organization qualifies	zation did not	check the box				nore, ched	
b	33% % support test—2008. If the organization qualification and stop here. The organization qualification qualification and stop here.	zation did not o	check a box on	line 13 or 16a,		33⅓ % 	or more,	check this
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum reacts the "facts-and-circum"	acts-and-circui	mstances" test,	check this box a	and stop here.	Expla	ın ın Part	IV how the
b 18	10%-facts-and-circumstances test—2008 more, and if the organization meets the "forganization meets the "facts-and-circumstates" Private foundation. If the organization did	acts-and-circunances" test The	nstances" test, o organization qua	check this box a alifies as a public	nd <b>stop here</b> . ly supported org	Explai ganiza	n in Part tion	IV how the ▶ □

# 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.)

Sec	tion A. Public Support						
Ca	llendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</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 6	The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b				ļ		<b></b>
8	Public support (Subtract line 7c from line 6.)						
	tion B. Total Support	4 1 0005	#1.0000	4.3.0007	(# 0000	( ) 0000	
	llendar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
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 carned on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for torganization, check this box and stop	here			-		
	tion C. Computation of Public Su	•				T T	
15 16	Public support percentage for 2009 (lin Public support percentage from 2008 S			e 13, column	(T))	15	<u> </u>
	tion D. Computation of Investmen			• • • •	<u>·····</u>	16	%
	Investment income percentage for 200		<del>-</del>	d by line 13 c	olumn (fl)	17	%
17 18	Investment income percentage for 200	•	• • •	•	Oldifili (1 <i>))</i> .	18	<del>%</del>
	33% % support tests—2009. If the orga				and line 15 is r	nore than 33	5%, and line
	17 is not more than 331/3 %, check this b						
b	33%% support tests—2008. If the organ line 18 is not more than 33%%, check this	box and stop	here. The organ	nızatıon qualıfie	es as a publicly	supported or	ganization 🕨 🔲
<u>20</u>	Private foundation. If the organization	did not check	a box on line 1	14, 19a, or 19b	, check this be	ox and see in	structions 🕨 🗌

chedule A (F	orm 990 or 990-EZ) 2009				Page 4
Part IV		Complete this Part III, line 12.	part to provide the Provide any other	ne explanations required er additional information	by Part II, line 10; See instructions.
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- <b></b>					<b></b>
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### . **1128**

### Application To Adopt, Change, or Retain a Tax Year

(Rev January 2008)
Department of the Treasury Internal Revenue Service

► See separate instructions.

OMB No 1545-0134

Attachment Sequence No 148

Li	Part I General Information	
П	Important: All filers must complete Part I and sign below See instructions  Name of filer (if a joint return is filed, also enter spouse's name) (see instructions)	Filer's identifying number
	Sycolia Creck Eleneutary School PTA	32.0198827
	Number, street, and room or suite no (if a P O box, see instructions)	Service Center where income tax return will be filed
Print	21100 Evergreen Hills Road	Oaden UT
o P	City or town, state, and ZIP dede	Filer's area code and telephone number/Fax number
90	heesburg UH 20175	(571)246-1808/( )
Ţ	Name of applicant, if different than the filer (see instructions)	Applicant's identifying number (see instructions)
	Name of person to contact (if not the applicant or filer, attach a power of attorney)	Contact person's area code and telephone number/Fax number
لـ		( ) /( )
1		
	☐ Individual ☐ Cooperative (sec 1381(a))	Passive foreign investment company (PFIC)
	☐ Partnership ☐ Controlled foreign corporation (CFC) (sec. 957)	(sec 1297)
	☐ Estate ☐ Foreign sales corporation (FSC) or Interest-charge domestic international sales corporation (IC-DISC)	U Other foreign corporation
	☐ S corporation ☐ Specified foreign corporation (IC-DISC)	✓ Tax-exempt organization ☐ Homeowners Association (sec. 528)
	Personal service 10/50 corporation (sec 904(d)(2)(E))	Other
	corporation (PSC)	(Specify entity and applicable Code section)
,	2a Approval is requested to (check one) (see instructions):	
•		
	☐ Adopt a tax year ending ► ☐	PSCs. Go to Part III after completing Part I.)
	☐ Change to a tax year ending ▶ ☐ Retain a tax year	ar ending ▶
	<b>b</b> If changing a tax year, indicate the date the present tax year ends. ▶	
	c If adopting or changing a tax year, the first return or short period return w	vill be filed for the tax year
	beginning ► , 20 , and ending ►	, 20
-3	Is the applicant's present tax year, as stated on line 2b above, also its curi	rent financial reporting year? ► ☐ Yes ☐ No
	4	
_	If "No," attach an explanation.  1 Indicate the applicant's present overall method of accounting.	cal reporting The 30
4		
	☐ Cash receipts and disbursements method ☐ Accrual method ☐ Other method (specify) ►	
	□ Other metriod (specify) ►	
-		
	Not. for profit PTA raises funds to support	rt school programs
	Signature—All Filers (See Who Must Sign	in the instructions.)
Ur an	nder penalties of perjury, I declare that I have examined this application, including accompanying id belief, it is true, correct, and complete. Declaration of preparer (other than filer) is based on a	g schedules and statements, and to the best of my knowledge Il information of which preparer has any knowledge.
	Filer*	Preparer (other than filer)
	AM Sula	
	Signature and date Sign	nature of individual preparing the application and date
	Michael J Whalit Treasurer	
	Name and title (print or type)	Name of individual preparing the application
		Programme are application
	the application is filed on behalf of a controlled foreign corporation or a	
10	/50 corporation by a controlling domestic shareholder, see instructions	Name of firm preparing the application

Pai	Automatic Approval Request (see instructions)		<b>49</b> 0 –
	lentify the revenue procedure under which this automatic approval request is filed ► Keu 85.58		
Sec	ction A—Corporations (Other Than S Corporations or Personal Service Corporations) (Rev. Proc. 2006-45, o successor)	or its	
1	Is the applicant a corporation (including a homeowners association (section 528)) that is requesting a change in	Yes	No
•	tax year and is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-45 (or its successor)? (see instructions)		
2	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short period?	227	البينيا
3	If "Yes" and the corporation is electing to change to a permitted tax year, file Form 1128 as an attachment to Form 2553. Is the applicant a corporation requesting a concurrent change for a CFC, FSC or IC-DISC? (see instructions)	\$\$	
Sec	tion B—Partnerships, S Corporations, Personal Service Corporations (PSCs), and Trusts (Rev. Proc. 2006-46, or its successor)		**************************************
4	Is the applicant a partnership, S corporation, PSC, or trust that is requesting a tax year and is not precluded from using the automatic approval rules under section 4 of Rev Proc. 2006-46 (or its successor)? (see instructions) .	- // 	
5	Is the partnership, S corporation, PSC, or trust requesting to change to its required tax year or a partnership, S corporation, or PSC that wants to change to a 52-53 week tax year ending with reference to such tax year?	177%	<u> </u>
6	Is the partnership, S corporation, or PSC (other than a member of a tiered structure) requesting a tax year that coincides with its natural business year described in section 4.01(2) of Rev Proc 2006-46 (or its successor)? Attach a statement showing gross receipts for the most recent 47 months (See instructions for information required to be submitted)		
7	Is the S corporation requesting an ownership tax year? (see instructions)		
8	Is the applicant a partnership requesting a concurrent change pursuant to section 6 09 of Rev. Proc 2006-45 (or its successor) or section 5 04(8) of Rev. Proc 2002-39 (or its successor)? (see instructions)		- 533
<u>Sec</u>	stion C—Individuals (Rev. Proc. 2003-62, or its successor) (see instructions)  Is the applicant an individual requesting a change from a fiscal year to a calendar year?	<b></b>	
	etion D—Tax-Exempt Organizations (Rev. Proc. 76-10 or 85-58) (see instructions)	->-	V
10	Is the applicant a tax-exempt organization requesting a change?	3/4	-sh ser
	Ruling Request (All applicants requesting a ruling must complete Section A and any other stapplies to the entity. See instructions.) (Rev. Proc. 2002-39, or its successor)	ection	that
Sec	tion A—General Information	Yes	No
1	Is the applicant a partnership, S corporation, personal service corporation, or trust that is under examination by the IRS, before an appeals office, or a Federal court?		
2	If "Yes," see the instructions for information that must be included on an attached explanation.  Has the applicant changed its annual accounting period at any time within the most recent 48-month period ending with the last month of the requested tax year?		
	If "Yes" and a letter ruling was issued granting approval to make the change, attach a copy of the letter ruling, or if not available, an explanation including the date approval was granted. If a letter ruling was not issued, indicate when and explain how the change was implemented.		
3	Within the most recent 48-month period, has any accounting period application been withdrawn, not perfected, denied, or not implemented?	*	
4a	Is the applicant requesting to establish a business purpose under section 5.02(1) of Rev. Proc. 2002-39 (or its successor)?		
b	If "Yes," attach an explanation of the legal basis supporting the requested tax year (see instructions)  If your business purpose is based on one of the natural business year tests under section 5 03, check the applicable box.		
	☐ Annual business cycle test ☐ Seasonal business test ☐ 25-percent gross receipts test Attach a statement showing gross receipts from sales and services (and inventory cost if applicable) for the test period (see instructions)		
5	Enter the taxable income or (loss) for the 3 tax years immediately preceding the year of change and for the short period. If necessary, estimate the amount for the short period.		
	Short period \$ First preceding year \$ Second preceding year \$ Third preceding year \$ Note: Individuals, enter adjusted gross income. Partnerships and S corporations, enter ordinary income. Section 501(c) organizations, enter unrelated business taxable income. Estates, enter adjusted total income. All other applicants, enter taxable income before net operating loss deduction and special deductions.		

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6	Corporations only, enter the losses or credits, if any, that were generated or that expired in the short period.  Generated Expiring	Yes	No
	Net operating loss       \$         Capital loss       \$		18 M
7	Unused credits \$ \$ Enter the amount of deferral, if any, resulting from the change (see section 5 05(1), (2), (3) and 6 01(7) of Rev Proc 2002-39, or its successor)		
8a	Is the applicant a U.S shareholder in a CFC?		
b	Will each CFC concurrently change its tax year?		
	Is the applicant a U.S. shareholder in a PFIC as defined in section 1297?	- 5 k	
l0a	Is the applicant a member of a partnership, a beneficiary of a trust or estate, a shareholder of an S corporation, a shareholder of an IC-DISC, or a shareholder of an FSC?	*	
	Will any partnership concurrently change its tax year to conform with the tax year requested? ▶  If "Yes" to line 10b, has any Form 1128 been filed for such partnership? ▶		
11	Does the applicant or any related entity currently have any accounting method, tax year, ruling, or technical advice request pending with the IRS National Office?		\ \frac{1}{2}
2	Is Form 2848, Power of Attorney and Declaration of Representative, attached to this application?		1
3	Does the applicant request a conference of right (in person or by telephone) with the IRS National Office, if the IRS proposes to disapprove the application?		
4	Enter amount of user fee attached to this application (see instructions)		
Sect 5	tion B—Corporations (other than S corporations and controlled foreign corporations) (see instructions)  Enter the date of incorporation. ▶		
	Does the corporation intend to elect to be an S corporation for the tax year immediately following the short	Yes	No
b	period?		
17	Is the corporation a member of an affiliated group filing a consolidated return?		
8a	Personal service corporations (PSCs). Attach a statement providing each shareholder's name, type of entity (individual, partnership, corporation, etc.), address, identifying number, tax year, percentage of ownership, and amount of income received from the PSC for the first preceding year and the short period.		

b If the PSC is using a tax year other than the required tax year, indicate how it obtained its tax year.

(attach copy))

☐ Section 444 election (date of election \_\_\_\_

Grandfathered (attach copy of letter ruling)
Letter ruling (date of letter ruling \_\_\_\_\_

	1128 (Rev 1-2008)	F	age 4
	tion C—S Corporations (see instructions)	1	
19	Enter the date of the S corporation election ▶	Yes	No
20	Is any shareholder applying for a corresponding change in tax year?		× / ·
21	If the corporation is using a tax year other than the required tax year, indicate how it obtained its tax year.  Grandfathered (attach copy of letter ruling)  Letter ruling (date of letter ruling)  (attach copy))		
22	Attach a statement providing each shareholder's name, type of shareholder (individual, estate, qualified subchapter S Trust, electing small business trust, other trust, or exempt organization), address, identifying number, tax year, percentage of ownership, and the amount of income each shareholder received from the S corporation for the first preceding year and for the short period		
Sec	tion D—Partnerships (see instructions)		
23	Enter the date the partnership's business began. ▶	Yes	No
24	Is any partner applying for a corresponding change in tax year?		
25	Attach a statement providing each partner's name, type of partner (individual, partnership, estate, trust, corporation, S corporation, IC-DISC, etc.), address, identifying number, tax year, and the percentage of interest in capital and profits	â; •	· **
26	Is any partner a shareholder of a PSC as defined in Regulations section 1.441-3(c)?	5 A	
27	If the partnership is using a tax year other than the required tax year, indicate how it obtained its tax year.  Grandfathered (attach copy of letter ruling)  Letter ruling (date of letter ruling)  (attach copy))	<u>, , , , , , , , , , , , , , , , , , , </u>	- 19 A
Sec	tion E—Controlled Foreign Corporations (CFC)	1	
28	Attach a statement for each U.S. shareholder (as defined in section 951(b)) providing the name, address, identifying number, tax year, percentage of total value and percentage of total voting power, and the amount of income included in gross income under section 951 for the 3 tax years immediately before the short period and for the short period.	3	
Sec	tion F—Tax-Exempt Organizations		
29	Type of organization: ☐ Corporation ☐ Trust ☐ Other (specify) ▶	Yes	No
30	Date of organization. ▶		*
31	Code section under which the organization is exempt. ▶	]	
32	Is the organization required to file an annual return on Form 990, 1120-C, 990-PF, 990-T, 1120-H, or 1120-POL? ▶		
33	Enter the date the tax exemption was granted. ▶		2
34	If the organization is a private foundation, is the foundation terminating its status under section 507?		
Sec	tion G—Estates		
35	Enter the date the estate was created ▶		
	Attach a statement providing the name, identifying number, address, and tax year of each beneficiary and each is an interested party of any portion of the estate.		
b	Based on the adjusted total income of the estate entered in Part III, Section A, line 5, attach a statement s distribution deduction and the taxable amounts distributed to each beneficiary for the 2 tax years immediately short period and for the short period.		
Sec	tion H—Passive Foreign Investment Companies		
37	If the applicant is a passive foreign investment company, attach a statement providing each U.S. shareholder's name identifying number, and percentage of interest owned	, addr	ess,

#### **Federal Financial Statements**

## VIRGINIA CONGRESS OF PARENTS AND TEACHERS ORGANIZATIONS Sycolin Creek Elementary PTA

32-0198827

Statement 1 Form 990-EZ, Part I, Line 6 Net Income (Loss) from Special Events

	Gross Receipts		Less Contributions		Gross Revenue		Less Direct Expenses		Net Income (Loss)	
After School Program	\$	673	\$	-	\$	673	\$	518	\$	155
Bingo for Books		-		-		-		534		(534)
Fall Festival		5,217		-		5,217		1,531		3,686
Holiday Shoppe		1,392		-		1,392		280		1,112
Market Day		1,718		-		1,718		1,325		393
Movie Night		406		-		406		573		(167)
Original Works		9,007		-		9,007		5,961		3,046
School Supplies		8,224		_		8,224		4,500		3,724
Spirit Night		1,297		-		1,297		-		1,297
Spirit Wear		4,712		-		4,712		4,064		648
Summer Send Off		1,437		-		1,437		2,030		(593)
Vanety Show		7,131	-			7,131		135		6,996
	\$	41,214	\$		\$	41,214	\$	21,451	\$	19,763

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

Bank Charges Returned Check Fee	18
Insurance	277
Membership Expense National & State Dues	627
Miscellaneous Discretionary Funds	2,000
Miscellaneous Office Supplies	228
Field Trips 1st Grade	100
Field Trips 4th - Jamestown	750
Field Trips Kindergarten	100
PTA Allotments Agendas	1,118
PTA Allotments : Assemblies	1,000
PTA Allotments . Calendar Magnets	572
PTA Allotments DARE (T-Shirts)	611
PTA Allotments Friday Folders	665
PTA Allotments Staff Appreciation	659
PTA Allotments Teacher Allotment	974
PTA School Activities Donuts with Dad	339
PTA School Activities Field Day	271
PTA School Activities * Muffins with Mom	380

\$ 10,689

### VIRGINIA CONGRESS OF PARENTS AND TEACHERS ORGANIZATIONS Sycolin Creek Elementary PTA

32-0198827

Statement 3 Form 990-EZ, Part III, Line 28 Statement of Program Service Accomplishments

	Grants and Allocations		Program Service Expenses	
Funds allocated to support administrative functions in the providing of additional resources to classrooms at Sycolin Creek Elementary School	\$	-	\$	3,150
Funds allocated to support field trips for individual classes associated with courses taught in the classroom		-		950
Funds allotted for school supplies and other materials to teachers from kindergarten to 5th Grade in support of various classroom activities		-		2,690
Funds allocated to other activities such Dare, Staff Appreciation, and other activities involving parents teachers and students	<u> </u>			3,899
	<u>\$</u>	<u>-</u>	\$	10,689