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# Form **990-EZ**

2009

OMB No 1545-1150

Department of the Treasury Internal Revenue Service

Short Form
Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form
990 All other organizations with gross receipts less than \$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

Open to Public Inspection

Α	For the 2009 calendar year, or tax year beginning 7/01 , 2009, and ending 6/30	, 2010
_		ployer identification number
	Please	6-4016441
	Inheles Lance emergence area	lephone number
	Initial return hype INTIDODA TI 60502	630) 236-1898
	Termination Specific	<del> </del>
	Application pending Nu	oup Exemption imber
	• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).  G Accounting metho Other (specify) ►	od X Cash Accrual
ı	Website: ► N/A required to attach	the organization is <b>not</b> Schedule B (Form 990,
	Tax-exempt status (check only one) —   X   501(c) ( 3 ) ◀ (insert no )   4947(a)(1) or   527   990-EZ, or 990-PI	<del></del>
	Check \[ \] If the organization is not a section 509(a)(3) supporting organization and its gross receipts are nor \$25,000 A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file	mally <b>not</b> more than e a complete return
	Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ	<b>►</b> \$ 62,787.
Pa		uctions for Part I.)
	1 Contributions, gifts, grants, and similar amounts received	1
	Program service revenue including government fees and contracts	2 31,327.
	3 Membership dues and assessments	3 4,612.
	4 Investment income	4
	5a Gross amount from sale of assets other than inventory  b Less cost or other basis and sales expenses  5b	
R	c Gain or (loss) from sale of assets other than inventory (Subtract In 5b from In 5a)	5c
	6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here	
8 2010	a Gross revenue (not including \$ of contributions	1
υ ΦΕ	reported on line 1) 6a 26,848.	
<b>=</b>	b Less direct expenses other than fundraising expenses 6b 12,314.	
	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 14,534.
)   	7a Gross sales of inventory, less returns and allowances 7a	
	b Less: cost of goods sold 7b	
$\exists$	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c
Ž	8 Other revenue (describe TCCLIVED)	8
SCANNEU SCANNEU	9 Total revenue Add ines 1, 2, 3, 4, 5c, 6c, 7c, 150 8	9 50,473.
3	10 Grants and similar mounts baid (attach schedule)	10
ທ <sub>ີ</sub>	11 Benefits paid to or for members	11
X	12 Salaries, other compensation, and employee benefits	12
E	13 Professional fees and other payments to independent contractors	<b>13</b> 220.
Š	14 Occupancy, rent, utilities, and maintenance	14
Š	13 1 thiting, publications, postage, and shipping	15
	16 Other expenses (describe SEE STATEMENT 1	16 55,020.
	17 Total expenses. Add lines 10 through 16	17 55,240.
А	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 -4,767.
N S E S T E	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return).	19 23,874.
' T S	20 Other changes in net assets or fund balances (attach explanation)	20
_	21 Net assets or fund balances at end of year Combine lines 18 through 20	21 19,107.
Pa	Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 inste	
31	(See the instructions for Part II )  (A) Beginning of ye	
22	· · · · · · · · · · · · · · · · · · ·	. 22 19,107.   23
23 24		24
25		
26		<del></del>
27	00.054	
	A For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.	Form <b>990-EZ</b> (2009)

	990-EZ (2009) GWENDOLYN BROOK			36	-40	16441 Page 2
	Statement of Program Se		See the instruction	ons.)		Expenses
Desc	is the organization's primary exempt purpose? <u>ED</u> cribe what was achieved in carrying out the ribe the services provided, the number of ram title.	DUCATIONAL SUPPORT ne organization's exempt purp f persons benefited, or other	ooses In a clear and co relevant information for	ncise manner, each	501 ( 501 ( orga 4947	urred for section c)(3) and (4) nizations and section (a)(1) trusts, optional thers)
	EDUCATIONAL TOOLS				1010	lilicia y
					1	
29	(Grants \$ ) If the OTHER STUDENT ACTIVITIES	nis amount includes foreign gi	rants, check here	<b>•</b>	28 a	15,958.
30	(Grants \$ ) If the FIELD TRIPS	nis amount includes foreign gi	rants, check here	<b>•</b>	29 a	7,595.
50						
	(Grants \$ ) If th	nis amount includes foreign gi	rants, check here	<b>-</b>	30 a	6,046.
31	Other program services (attach schedule (Grants \$ ) If the	e) SEE STATEMENT 2 his amount includes foreign gi	rants, check here	▶ [	31 a	8,285.
	Total program service expenses (add II				32	37,884.
Par	List of Officers, Directors					
	(a) Name and address	(b) Title and average hours per week devoted to position	not paid, enter -0)	(d) Contribution employee benefit pla deferred compens	ns and	(e) Expense account and other allowances
JOI	DY BURLEYSON	CO-PRESIDENT 0	0.		0.	0.
	RORA, IL 60502 REDITH SONETZ	VICE PRESIDENT	0			
	CEDIIN SUNCIZ	VICE PRESIDENT	0.		0.	0.
$\overline{}$	ORA, IL 60502					
	PHANIE MCVEY	SECRETARY 0	0.		0.	0.
	RORA, IL 60502 M DUVAL	SECRETARY	0.		0.	0.
7110	ORA, IL 60502	0			•	,
	RON SHATTO	CO-PRESIDENT	0.		0.	0.
AUF	ORA, IL 60502	0				
COI	LEEN STEFFGEN	TREASURER	0.	*	0.	0.
AUF	ORA, IL 60502	U				
		, <u></u>				1,
						-
<del>-</del>		,				

	990-EZ (2009) GWENDOLYN BROOKS PTA 36-401644	1	Р	age <b>3</b>
Pai	t V Other Information (Note the statement requirements in the instrs for Part V.) SEE ST.	ATEM	ENT	3
•			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		Х
34	Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T			
	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?	35 a		<u>X</u>
t	If 'Yes,' has it filed a tax return on Form 990-T for this year?	35 b		
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		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions Did the organization file Form 1120-POL for this year?	37 b		X
<b>38</b> a	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?	38 a		X
ŀ	If 'Yes,' complete Schedule L, Part II and enter the total amount involved  38b  N/A			
39	Section 501(c)(7) organizations. Enter	7		
ā	Initiation fees and capital contributions included on line 9.  39a N/A		1	
	Gross receipts, included on line 9, for public use of club facilities  39b  N/P	7	1	
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under.			
	section 4911 ► 0., section 4912 ► 0., section 4955 ► 0.	ļ	-	
ł	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	40 b		<u>x</u>
(	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			
(	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
•	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	40 e		X
41	List the states with which a copy of this return is filed NONE	400	ŀ	
428	The organization's books are in care of ► SHARON SHATTO Telephone no ► (630)	236	-189	8
	Located at ► AURORA IL ZIP + 4 ► 60502		_ =	<u>-</u>
I	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42 b	Yes	No X
	If 'Yes,' enter the name of the foreign country			
	Con the contraction for accordance and files are consisted for Form TD FOO CO. 1 December 1 D. 1 D. 1 D. 1 D. 1			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of a Foreign Bank and Financial Accounts	40.		
•	At any time during the calendar year, did the organization maintain an office outside of the U.S.?  If 'Yes,' enter the name of the foreign country	42c		
	11 100, Chief the harme of the following country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here		▶ []	N/A
	and enter the amount of tax-exempt interest received or accrued during the tax year			N/A
			Yes	No
44	Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead		163	
4-	of Form 990-EZ	44		X
	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	<u> </u>	X
RΔΔ	TEE ADS 121 01/30/10 F/	rm 991	LE7 /	MINUL

_	EZ (2009) GWENDOLYN BROOKS P'			36-4016			age 4
Part VI	Section 501(c)(3) organization	s and section 4947	7(a)(1) nonexempt	charitable trusts only	y. All sec	ction	,
•	501(c)(3) organizations and se 46-49b and complete the table	s for lines 50 and 5	onexempt charitabl 51.	e trusts must answer	questioi	15	
					T	Yes	No
46 Did to	he organization engage in direct or indire ublic office? If 'Yes,' complete Schedule	ect political campaign a C. Part I	ctivities on behalf of or	in opposition to candidate	s 46	162	X
	he organization engage in lobbying activi		Schedule C. Part II		47		X
	e organization a school as described in s	•	·	edule F	48		X
	he organization make any transfers to ar		•		49a		X
	es,' was the related organization a section	•			49 b		
	•	_	amalayaas (athar than	afficació directore tructore			
empl	plete this table for the organization's five loyees) who each received more than \$10	00,000 of compensation	from the organization	If there is none, enter 'No	ne.		
(a	) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp accour other allo	it and	5
NONE							
				ļ			
		-					
	- ···						
f Total	I number of other employees paid over \$	100.000		<u>.l.                                     </u>			—
	The man of the state of the sta		<del></del>				
<b>51</b> Com	plete this table for the organization's five	highest compensated	independent contractor	s who each received more	than \$100	0,000	of
comp	bensation from the organization. If there	is none, enter 'None '					
	(a) Name and address of each independent cont	ractor paid more than \$100,00	0	(b) Type of service	(c) Comp	ensatio	ח
NONE _							
	· · · · · · · · · · · · · · · · · · ·						
<b>d</b> Total	I number of other independent contractor	s each receiving over \$	5100,000	•			
	Under penalties of perjury, I declare that I have exar true, correct, and complete Declaration of preparer	nined this return, including acci (other than officer) is based on	ompanying schedules and state all information of which prepai	ements, and to the best of my know er has any knowledge	ledge and bel	ief, it is	;
	0-00-	0, 0,	_	1 10 01			
Sign	Colliem 4n	Markette		10-90-	<u>10 </u>		
Here	Signature of officer	$C_{\alpha} = 000$		Date			
		tgen - 1	reasurer	· · · · · · · · · · · · · · · · · · ·			
	Type or print name and title	<del>-</del> / _					mbe-
			I_	10	oraria laterati	and At	mper
Paid	Preparer's DODED TO N. EVA	In Elus	Date	C\   Seii.	arer's Identify instructions)	ying Nu	
Pre-	signature RODERICK N. EVA		Date 10-5-1	Check if self. See N/		/ing Nu	
Pre- parer's	Firm's name (or RODERICK N. EVA	NS, CPA, LTD.		employed N/	A	/ing Nu	
Pre- parer's Use	Firm's name (or yours if self-employed).  **Today Supplementation of the supplementation of	NS, CPA, LTD.		EIN N/	A /A		
Pre- parer's Use Only	Firm's name (or yours if self-employed).  **Today Supplementation of the supplementation of	NS, CPA, LTD. 60563	10-5-1	EIN N Phone no (630)	A /A	1630	

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

### **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

Department of the Treasury Internal Revenue Service Name of the organization

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

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Schedule A (Form 990 or 990-EZ) 2009

Name of the organization							Employe	dentificat	ion number	
GWENDOLYN BROOKS								16441		
Part I Reason for Pu	blic Charity Statu	s (All organizations	must d	comple	te this	part.)	See i	nstructi	ons	
The organization is not a pri	vate foundation becau	ise it is (For lines 1 thro	ugh 11,	check o	nly one	box )				
1 A church, conventi	on of churches or ass	ociation of churches desc	cribed in	section	170(b)	(1)(A)(i)	ı <b>.</b>			
2 A school described	I in section 170(b)(1)(	A)(ii). (Attach Schedule 6	E)							
3 A hospital or coope	erative hospital servic	e organization described	ın secti	on 1 <b>70</b> (	b)(1)(A)(	iii).				
4 A medical research	n organization operate	ed in conjunction with a h	ospital (	describe	d in sec	tion 17	0(b)(1)(A	Xiii) En	ter the hosp	ıtal's
name, city, and sta		•	•					~ /		
5 An organization op 170(b)(1)(A)(iv). (0	perated for the benefit Complete Part II)	of a college or university	owned	or oper	ated by	a gover	nmenta	unit des	scribed in se	ction
6 A federal, state, or	local government or	governmental unit descri	bed in s	ection 1	70(b)(1)	(A)(v).				
in section 170(b)(1	(Complete P	-			vernme	ntal uni	t or fron	the gen	eral public d	escribed
		170(b)(1)(A)(vi). (Comple								
from activities relate investment income June 30, 1975 See	ed to its exempt function and unrelated busine e section 509(a)(2). (C	· ·	eptions, a section	and (2) r 511 tax)	o more t from be	than 33- usinessi	1/3 % of es acqui	its sunno	rt from aross	
10 An organization or	ganized and operated	exclusively to test for pu	ublic safe	ety See	section	1 509(a)	(4).			
11 An organization or more publicly supp describes the type	ganized and operated orted organizations of of supporting organiz	exclusively for the benef described in section 509(a zation and complete lines	fit of, to a)(1) or s 11e thi	perform section rough 11	the fun 509(a)(2 Ih	ctions o 2). See	of, or ca <b>section</b>	rry out th <b>509(a)(3</b> )	e purposes of the check the	of one or box that
a Type I	<b>b</b> Type II	c Type III	I — Fund	ctionally	ıntegrat	ted		d 🗌	Type III- O	ther
e By checking this be than foundation ma 509(a)(2)	ox, I certify that the or anagers and other tha	ganization is not controll n one or more publicly si	led dired upported	tly or in	directly zations	by one describe	or more ed in sec	disquali ction 509	fied persons (a)(1) or sec	other tion
f If the organization check this box		ermination from the IRS			• .		Ť	_		
<b>g</b> Since August 17, 2	2006, has the organiza	ition accepted any gift o	r contrib	oution fro	om any	of the fo	ollowing	persons	?	
									\	es No
below, the go	overning body of the s	controls, either alone or upported organization?	together	with pe	rsons d	escribed	d in (ii) a	and (III)	11 g (i)	
	ber of a person desc	**							11 g (ii)	
	•	ı described in (i) or (ii) al							11 g (iii)	
h Provide the following	ng information about t	the supported organization	ons						<del>,</del>	
(i) Name of Supported Organization	(II) EIN	(III) Type of organization (described on lines 1-9 above or IRC section (see instructions))	organizat (i) listed gove	Is the tion in cold in your erning ment?	the organ	ou notify ization in (i) of ipport?	organizat	zed in the	(vii) Amount o	f Support
	_		Yes	No	Yes	No	Yes	No		
								1		
			ļ							
· <del></del>										
								T		
								I		
			<u> </u>							
Total  BAA For Privacy Act and Paperv	vork Reduction Act Notice	see the Instructions for Form	1 990 or 99	0-EZ.		<u> </u>	Schedule	A (Form	n 990 or 990	-FZ) 2009

`	Complete only if you check				(b)(1)(A)(iv) an 	id 1 <b>70(b)</b> (1	)(A)(	vi) 	
Cale	tion A. Public Support	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	<u> </u>	(f) Total	
-	nning in) S Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	(a) 2000	(5) 2500	(0) 2507	(0) 2000	(0) 200	_	(1) Total	
	not include 'unusual grants ')  Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf								
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.								
4	Total. Add lines 1-through 3								
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f).								
	Public support. Subtract line 5 from line 4								
	tion B. Total Support	<del></del>	T	<del> </del>	T				
Calendar year (or fiscal year beginning in) ►		(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009		(f) Total	
-	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on								
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV).								
11	<b>Total support.</b> Add lines 7 through 10								
12	Gross receipts from related activ	rities, etc (see in	structions)				12		
13	First five years. If the Form 990 organization, check this box and	is for the organiz I stop here	ation's first, seco	nd, third, fourth,	or fifth tax year a	s a section 5	601(c)(	(3)	
Sec	tion C. Computation of Pu	blic Support F	Percentage						
	Public support percentage for 20	·		ne 11, column (f)		ļ.	14	%	
	Public support percentage from		•			L	15	%%	
	a 33-1/3 support test — 2009. If the and stop here. The organization	qualifies as a pu	blicly supported o	organization				▶ [_	
ŀ	33-1/3 support test – 2008. If the and stop here. The organization	e organization did qualifies as a pu	I not check a box blicly supported c	on line 13, or 16 organization	a, and line 15 is 3	3-1/3% or m	ore, c	heck this box	
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the facts-	and-cırcumstance	s' test. check this	box and <b>stop he</b>	<b>re.</b> Explain ir	n Part	IV how	
ŀ	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-	and-circumstance	s' test, check this	box and stop he	re. Explain ir	n Part	15 is 10% IV how the ► □	
18	Private foundation. If the organi		-	·		-		structions -	
BAA					Sc	hedule A (Fo	orm 99	0 or 990-EZ) 2009	

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						
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	<b>(e)</b> 2009	(f) Total
	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants ')	11			` '		
	not include unusual grants ')	5,127.	1,837.	4,161.	4,007.	4,612.	19,744.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	101,615.	89,621.	65,370.	53,396.	58,175.	368,177.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	101/013.	03,021.	03,370.	33,330.	30,173.	0.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				V-100.		0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
6	Total. Add lines 1 through 5	106,742.	91,458.	69,531.	57,403.	62,787.	387,921.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the	0.	0.		,		
_	year : Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line	0.	- 0.	0.		0.	0.
0	7c from line 6)					-	207 021
Sec	tion B. Total Support		1				387,921.
		(a) 2005	<b>(b)</b> 2006	(c) 2007	(4) 2008	(a) 2009	(n Total
Cale	ndar year (or fiscal yr beginning in)	(a) 2005 106, 742	<b>(b)</b> 2006	(c) 2007	(d) 2008 57, 403	(e) 2009	(f) Total
Cale 9		(a) 2005 106, 742.	<b>(b)</b> 2006 91, 458.	(c) 2007 69, 531.	(d) 2008 57, 403.	<b>(e)</b> 2009 62,787.	387,921.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	106,742.					387,921.
Cale 9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b						0. 0.
Cale 9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 10b, whether or not the business is	106,742.	91,458.	69,531.	57,403.	62,787.	0. 0. 0.
Cale 9 10 a 1	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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	106,742.	91,458.	69,531.	57,403.	62,787.	0. 0.
Cale 9 10 a 11 11 12 13 14	Amounts from line 6 I Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and	0.	91, 458.  0. ation's first, secon	0.	0.	0.	0. 0. 0. 0. 387,921.
Cale 9 10 a k 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul	0.  s for the organizatop here	91, 458.  0.  ation's first, secon	69, 531. 0.	0.	0.	0. 0. 0. 0. 387,921. 3) ► □
110 a b c c c c c c c c c c c c c c c c c c	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20	0.  Is for the organization here  Olic Support P  09 (line 8, column	91, 458.  0.  ation's first, secon ercentage n (f) divided by line	69, 531. 0.	0.	0. 0.	0. 0. 0. 0. 0. 387,921. 33 ► □
10 a b c c c c c c c c c c c c c c c c c c	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20	0.  Is for the organization here  blic Support P  09 (line 8, column 2008 Schedule A,	91, 458.  0.  ation's first, secondercentage of (f) divided by line Part III, line 15	69, 531.  0.  d, third, fourth, of the 13, column (f))	0.	62, 787.  0.	0. 0. 0. 0. 387,921. 3) ► □
10 a b c c c c c c c c c c c c c c c c c c	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 20 Public support percentage from 21 tion D. Computation of Inv	0.  s for the organization here blic Support P 09 (line 8, column 2008 Schedule A, estment Incor	91, 458.  0.  ation's first, secondercentage of (f) divided by line Part III, line 15 one Percentage	69, 531.  0.  d, third, fourth, (	0.	0. 0. 15 16	0. 0. 0. 0. 0. 387,921. 3) ► □  100.0%
11 12 13 14 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 2 tion D. Computation of Inv	o.  106, 742.  0.  s for the organization here  blic Support P  09 (line 8, column  2008 Schedule A,  estment Incomor 2009 (line 10c,	91, 458.  0.  otion's first, secondercentage of (f) divided by line Part III, line 15 one Percentage column (f) divided	69, 531.  0.  d, third, fourth, of third, fourth, of third is a second of the second o	0.	0. 0.	0. 0. 0. 0. 0. 387,921. 3) ► □ 100.0% 100.0%
Cale 9 10 a l l l l l l l l l l l l l l l l l l	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage for 20 Public support percentage from Investment income percentage fi	0.  Is for the organization here  blic Support P  09 (line 8, column  2008 Schedule A,  estment Incom  or 2009 (line 10c,  rom 2008 Schedul	91, 458.  0.  otion's first, secondercentage of (f) divided by line Part III, line 15 one Percentage column (f) divided le A, Part III, line	0. d, third, fourth, of third, column (f))	0.  or fifth tax year as	0. 0. 15 16	0. 0. 0. 0. 0. 387,921. 3) ► □ 100.0% 100.0% 0.0%
11 12 13 14 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.) First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 3 tion D. Computation of Investment income percentage from 1 tion D. Computation of Investment income percentage for 133-1/3 support tests – 2009. If the comore than 33-1/3%, check this be	o.  106, 742.  0.  1s for the organization here  blic Support P  09 (line 8, column  2008 Schedule A,  estment Incom  or 2009 (line 10c,  rom 2008 Schedul  organization did not  ox and stop here.	91, 458.  0.  0.  ercentage  n (f) divided by line Part III, line 15  ne Percentage  column (f) divided le A, Part III, line check the box on line The organization	d, third, fourth, of the 13, column (f))  I by line 13, column (f) the 14, and line 15 qualifies as a pu	0.  or fifth tax year as  mn (f))  is more than 33-1/3 iblicly supported of	62, 787.  0.  15  16  17  18 %, and line 17 is not organization	0. 0. 0. 0. 0. 387,921. 3) ► □ 100.0% 100.0% 0.0%
11 12 13 14 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form 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 inline 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 lins 9, 10c, 11, and 12.)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pul Public support percentage from 3 Thought 10 the computation of Investment income percentage from 3 Investment income percentage for 133-1/3 support tests – 2009. If the computation of position of the computation of processing the computation of the computation of processing the computation of Investment income percentage for 133-1/3 support tests – 2009. If the computation of the computation of the computation of processing the computation of the computation of Investment income percentage for 133-1/3 support tests – 2009. If the computation of the comp	o.  106, 742.  0.  1s for the organization did not ox and stop here.  1008 Schedule A, estment Income 2008 Schedule A, estment	91, 458.  0.  0.  ercentage  (f) divided by line Part III, line 15  ne Percentage  column (f) divided le A, Part III, line check the box on li The organization d not check a box p here. The organi	d, third, fourth, of the 13, column (f))  I by line 13, column (f)  I by line 14, and line 15 qualifies as a pure on line 14 or 19 azation qualifies as	or fifth tax year as mn (f))  is more than 33-1/3 iblicly supported ca, and line 16 is n is a publicly support	62, 787.  0.  15 16  17 18 %, and line 17 is not organization more than 33-1/3% orted organization.	0. 0. 0. 0. 0. 387,921. 3) ► □ 100.0% 100.0% 0.0%

Schedule A	(Form 990 or 990-E	EZ) 2009	GWENDOLYN	BROOKS	PTA		36-4016441	Page 4
Part IV	Supplemental I	Information 17b	on. Complete	this part	to provide	the explanations rec	quired by Part II, line mation. See instruction	10;
	rait ii, iiile 17a	101 170,	and Fart III, II	12. 7	roviue arry	other additional infor	mation. See instruction	UIIS.
								- <del>-</del>

## SCHEDULE G (Form 990 or 990-EZ)

# Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service

Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form990 or Form 990-EZ. ► See separate instructions.

Open to Public Inspection

Name of the organization		_				Employer identifica	ition number	
GWENDOLYN BROOKS PTA					36-4016441			
Part I Fundraising Activities. Comp	plete if the organ	nization ar	nswered 'Y	es' to Form 990, Part I	V, line	i7		
1 Indicate whether the organization	-						<del>,</del>	
Mail solicitations	raicea rainae irri	oug. u,	00	Solicitation of non-				
Internet and email solicitation	•			Solicitation of gover	_	-		
H	5			<b>—</b>		-		
Phone solicitations				Special fundraising	events			
In-person solicitations				al Caralisation afficiency als		4		
2a Did the organization have written employees listed in Form 990, Pa	or oral agreeme rt VII) or entity i	n connect	ion with p	rofessional fundraising	services	trustees or key	Yes No	
<b>b</b> If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the	ndividuals or ent			=				
	T				<b>(v)</b> Ar	mount paid to		
(i) Name of individual	(ii) Activity	(III) DId	fundraiser	(iv) Gross receipts	(or	retained by)	(vi) Amount paid to	
or entity (fundraiser)		of contri	ty or control butions?	from activity	Tunar	aiser listed in col (i)	(or retained by) organization	
	<u> </u>	Yes				oo. (,)	organization.	
		162	No					
		ļ						
	ļ							
					-			
	1							
	1	<u> </u>	L					
Total			_					
Total  3 List all states in which the organization	ation is register	rad or lice	acad ta co	light funds or has been	notified	it is exempt fro	m registration	
or licensing	ation is register	ieu oi iice	iiseu io sc	ment runus or mas been	notineu	it is exempt inc	in registration	
-								

Page 2

Par	τ	Fundraising Events. Complete if reported more than \$15,000 on F	tne organization ai orm 990-EZ. line 6	nswered Yes' to Fo a. List events with	orm 990, Part IV, II gross receints grea	ne 18, or ater than	\$5.00	0.
Б		Topolog more diam project off	(a) Event #1 GIFT WRAP SALE	<b>(b)</b> Event #2	(c) Other Events	(d) Tot	al Even	nts
E			(event type)	(event type)	(total number)			
<b>ポートリア コード・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・</b>	1	Gross receipts	21,305.		-		21,3	<u>305.</u>
	2	Less Charitable contributions						
	3	Gross income (line 1 minus line 2)	21,305.				21,3	305.
	4	Cash prizes						
D	5	Noncash prizes						
DIRECT	6	Rent/facility costs		-		<u> </u>		
	7	Food and beverages						
Ž P E	8	Entertainment						
EXPEZSES	9	Other direct expenses	10,880.				10,8	380.
3		Direct expense summary. Add lines 4- ti			<b>•</b>		10,8	
Bar	11 t III	Net income summary Combine lines 3, o		al to Farms 000 Day	- 10		10,4	
<u>  Pai</u>	( III	Gaming. Complete if the organize \$15,000 on Form 990-EZ, line 6a	ation answered ite	s to Form 990, Pai	rt IV, line 19, or re	portea m	ore th	an
_			(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	( <b>d</b> ) Tota	al namı	
REVENUE			(a) Bingo	bingo/progressive bingo	(b) Other garming	(Add col.	(a) thre	ough
ñ								
	1	Gross revenue				<del>                                     </del>		
D X	2	Cash prizes						
DIRECT	3	Non-cash prizes						
S	4	Rent/facility costs						
	5	Other direct expenses				ļ		
			Yes%	Yes%	Yes%			
	6	Volunteer labor	No	No	No			—-
	7	Direct expense summary. Add lines 2 thr	rough 5 in column (d)		•			
	8	Net gaming income summary Combine in	lines 1, column (d) and	line 7				
	_					r	YES	NO
		er the state(s) in which the organization of ne organization licensed to operate gamine				— — 9;	<u>_</u>	<del> </del>
		lo,' explain:	g activities in each of th	iese states.			†	
10:	 2 Wor	e any of the organization's gaming license	e revoked suspended	or terminated during the				
		e any or the organization's gaming items. 'es,' explain:	es revokeu, suspendeu	or terminated during the	e lax yeal:	10.	<u> </u>	
							1	
11	 Doe	s the organization operate gaming activiti	es with nonmembers?				-	
12	ls th	ne organization a grantor, beneficiary or tr		ember of a partnership of	or other entity formed t			/ <b>T</b>
	adm	ninister charitable gaming?		<del></del>		12	Į	<u> </u>

Schedule G (Form 990 or 990-EZ) 2009 GWENDOLYN BROOK	S PTA	36-4016441	F	Page 3
		_	YES	NO
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	13a	8		
<b>b</b> An outside facility	131	8		
14 Enter the name and address of the person who prepares the	ne organization's gaming/special events bo	oks and records	İ	İ
			- 1	
Name: •				
Address· ►				
15a Does the organization have a contact with a third party from	n whom the organization receives gaming	revenue?	15a	
<b>b</b> If 'Yes,' enter the amount of gaming revenue received by the	ne organization \$a	ind the amount		
of gaming revenue retained by the third party \$				
c If 'Yes,' enter name and address of the third party:				
Name <sup>.</sup> •				
All				
Address				
16 Gaming manager information				
Name. <b>&gt;</b>				
Gaming manager compensation ► \$				
Description of services provided				1
Director/officer Employee	Independent contractor			
	Independent contractor			
17 Mandatory distributions				
a Is the organization required under state law to make charita	able distributions from the gaming proceed	ds to retain the		]
a Is the organization required under state law to make charita state gaming license?			17a	ļ ,
<b>b</b> Enter the amount of distributions required under state law t		ions or spent in the		
organization's own exempt activities during the tax year		1 1 2 6		
BAA	EEA3703L 02/05/10 So	chedule G (Form 990 o	or 990-EZ	) 2009

2009 F	EDERAL STATEMENTS		PAGE 1
	GWENDOLYN BROOKS PTA		36-4016441
STATEMENT 1 FORM 990-EZ, PART I, LINE 16 OTHER EXPENSES			
ADMINISTRATIVE COSTS ASSEMBLIES EDUCATIONAL TOOLS FAMILY AND SCHOOL ACTIVITIES FIELD TRIPS GIFT TO SCHOOL INSURANCE NATIONAL DUES OTHER STUDENT ACTIVITIES		\$	5,586. 3,099. 15,958. 5,186. 6,046. 8,199. 325. 1,025. 7,595.
STAFF APPRECIAATION		TOTAL \$	2,001. 55,020.
STATEMENT 2 FORM 990-EZ, PART III, LINE 31 STATEMENT OF PROGRAM SERVICE	E ACCOMPLISHMENTS		
DESCR:	IPTION	GRANTS	PROGRAM SERVICE EXPENSES
FAMILY AND SCHOOL ACTIVITIES	INCLUDES FOREIGN GRANTS: NO		5,186.
ASSEMBLIES	INCLUDES FOREIGN GRANTS: NO		3,099.
	INCLUDES FOREIGN GRANTS: NO		
	TOTAL 3	5 0.	8,285.
(A) DID THE ORGANIZATION, DUI	FED WITH PERSONAL BENEFIT CONTR RING THE YEAR, RECEIVE ANY FUNDS N A PERSONAL BENEFIT CONTRACT? RING THE YEAR, PAY PREMIUMS, DIN EFIT CONTRACT?	S, DIRECTLY OR	NO NO

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