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27

990-E7

Short Form Return of Organization Exempt From Income Tax

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

OMB No. 1545-1150 2009

Open to Public Inspection

Department of the Treesury Internal Resenue Service

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must tile 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.

A For the 2009 calendar year, or tax year beginning . 20 July 1 2009, and ending June 30 B Check if applicable: C Name of organization D Employer Identification number Se IRS Address change Robious Elementary School PTA 54 1154118 label or Name change Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telephone number Initial return 804-378-2500 2801 Robious Corssing Drive Terminated City or town, state or country, and ZIP + 4 F Group Exemption Amended return. Application pending Midlothian, VA 23113 Number > 3229 Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ). Other (specify) H Check ▶ if the organization is not required to attach Schedule B (Form 990, Website: ▶ www.respta.org 990-EZ, or 990-PF). K Check D if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$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 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 82236 Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.) 7223 Contributions, gifts, grants, and similar amounts received 1 38174 2 Program service revenue including government fees and contracts 2 1785 3 3 Membership dues and assessments . . . 4 0 4 Investment income Gross amount from sale of assets other than inventory 5a Less: cost or other basis and sales expenses 5b Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . 5c 0 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ▶ □ Gross revenue (not including \$ _ __ of contributions 46182 62 6Ъ 39665 Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . 6517 8c Gross sales of inventory, less returns and allowances 7a 27386 11591 Less: cost of goods sold 7Ъ 15795 Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c Other revenue (describe ▶ 8 8 69494 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 10 Grants and similar amounts paid (attach schedule) 0 10 0 11 Benefits paid to or for members 11 12 Salaries, other compensation, and employee benefits 0 12 Professional fees and other payments to independent 26604 13 13 O 14 0 Occupancy, rent, utilities, and maintenance 14 Ś 15 700 Printing, publications, postage, and shipping 15 16 Other expenses (describe > 42986 See schedule 16 70290 17 Total expenses. Add lines 10 through 16 . 17 18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 796 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 19595 20 Other changes in net assets or fund balances (attach explanation) . 20 21 21 20391 Net assets or fund batances at end of year. Combine lines 18 through 20 Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ. (See the instructions for Part II.) (A) Beginning of year **CBN** End of year 19595 20391 22 Cash, savings, and investments 22 Land and buildings . . . 0 23 0 23 0 24 0 24 Other assets (describe ▶ Total assets 19595 25 20391 25 26 Total liabilities (describe ▶ 0 26 Net assets or fund balances (line 27 of column (B) must agree with line 21) 19595 27 20391

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

Cat. No. 106421

Form 990-EZ (2009)



Par	Statement of Program Service Accom	plishments (See the instr	uctions for Part II	L)	ŀ	Expenses
Wha	t is the organization's primary exempt purpose?	Parent/Teacher supporting	organization		(Requ	ired for section
Desc	ribe what was achieved in carrying out the org	nd concise		(3) and 501 (c)(4)		
	ner, describe the services provided, the number of				, -	izations and section
	program title.					(a)(1) trusts; optional hers.)
00	PTA Events ~ enrichment/afterschool classes, holida		-C140	-41-4-	R21 01	lies.y
26		ly events, camival) that beni	EIII UTE ETILITE SILIDE	nt body		
	(approximately 650 children)					
	(Grants \$) If this amount	includes foreign grants, chi	eck here	. ▶ 🛘	28a	39665.00
29	PTA Projects (cultural performances, festivities, recy	reling)				
						1
	/O					
		includes foreign grants, chi		. ▶ ⊔	29a	8900.00
30	Teaching Toots ~ used to enrich curriculum (grade to	evel materials for EL and LA,	math and science,	and social		1
	studies, library books)					1
						1
	(Grants \$) If this amount	includes foreign grants, chi	eck here	. ▶ □	30a	20787.00
31	Other program services (attach schedule)				-	1
	. • • • • • • • • • • • • • • • • • • •	includes foreign grants, che	anderbana	. ▶ □	240	
32	Total program service expenses (add lines 28a t			·	31a	CO 5730 CO
				and (Contha	32	69532.00
Par	List of Officers, Directors, Trustees, and Key					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (If not paid,	(d) Contribution employee benefit	ns to ntans &	(e) Expense account and
		devoted to position	enter -0-1)	deferred comper		other allowances
Erin	Doyte					1
1342	1 Welby Mews, Midlothian, VA 23113	President, 20 hours	o		0	o
	a Carman					
	3 Grendon Drive, Midlothian, VA 23113	President-Elect, 5 hours	_			
			0			0
	ii Turner	1st VP, 10 hours		i	ŀ	i
2201	Carbon Hill Drive, Midlothian, VA 23113	154 07, 15 11525	0		0	0
Nina	McCord	2nd 1/D 40 hours	<u> </u>			
1601	Winbury Drive, Midlothian, VA 23113	2nd VP, 10 hours	o		0	o
Robi	in Hogge		l .			
	11 Foxstone Road, Midlothian, VA 23113	Corres. Secretary, 2 hours	a	i	0	
	na Jamison					-
		Treasurer, 5 hours			_	
	7 Welby Mews, Midlothian, VA 23113		0		0	0
Jenr	rifer Breslin	Recording Secretary, 5 hrs		İ		
1921	Thornleigh Road, Midlothian, VA 23113	,		0	0	
Kati	ny Logsdon			:		
2900	Calcutt Drive, Midlothian, VA 23113	County Council Del, 1 hour	o	Ì	0 (
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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		1
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		1
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		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		<u> </u>
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			
ь	Did the organization file Form 1120-POL for this year?	37Ъ		1
38 a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or ware			
	any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		7
ь	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			
ь	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 ▶ 0 : section 4912 ▶ 0 : section 4955 ▶ 0			
h	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	400		1
_	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	400		
c	organization managers or disqualified persons during the year under sections 4912,			
	· · · · · · · · · · · · · · · · · · ·			
a	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	40e	Į.	1
41	List the states with which a copy of this return is filed. ▶			
42 a	7 10 10 10 10 10 10 10 10 10 10 10 10 10	804-46		
	Located at ▶ 13457 Weiby Mews, Midlothian, VA ZIP + 4 ▶	Z311.	-3664	
Ь	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	F	Yes	No
	account)?	42b		. ✓
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
C	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	ľ	<u> </u>
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filling 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	ts 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

Part V	Section 501(c)(3) organizations and 501(c)(3) organizations and section 49 and complete the tables for lines 50 are	47(a)(1) nonexempt cha	nexempt charital pritable trusts mu	ble trusts only. A st answer question	li sec ns 4	tion 6-49	b b		
	Did the organization engage in direct or indirec		ities on behalf of o	r in opposition to		Yes	No		
•	candidates for public office? If "Yes," complete	Schedule C, Part I			46		1		
	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II								
	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E								
	If "Yes," was the related organization a section 527 organization?								
	complete this table for the organization's rive near the property of the control								
		(b) Title and average	(c) Compensation	(d) Contributions to	_	Exper			
	(a) Name and address of each employee paid more than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation	account an				
	um procuos	CERCUEU ID PRESIDENT			Guite	autu	11000		
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f	Fotal number of other employees paid over \$10	<u> </u>		<u>.</u>	,				
	(a) Name and address of each independent contractor	r paid more than \$100,000	(b) T	pe of service	(c) Co	upens	ation		
ď	Total number of other independent contractors	each receiving over \$100,	▶						
	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and pemplete. Declaration								
Sign Here	Signature of officer			11 15 H)					
	Erin Doyte, President Type or print name and title								
Paid Process	Preparer's signature	Date	Check if self- emptoyed ▶	Preparer's identifying nur	Tiber (Se	e instru	ctions)		
Prepare Use Onl			+	IN ►					
May the	e IRS discuss this return with the preparer show	m above? See instruction:		🕨 🛚	Yes		No (2009)		

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.

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

OMB No. 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number BA : 1154119

Rot	iou	s Elementary	School PTA					_	54	1	1154118	
Pa	rt I	Reason	for Public Ch	arity Status (Ali or	ganizati	ons mus	t compl	ete this	part.) Se	e instru	ctions.	
The	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).											
2		A school des	scribed in section	on 170(b)(1)(A)(ii). (At	tach Sch	edule E.)						
3		A hospital or	a cooperative I	nospital service organ	nization d	escribed	in sectio	n 170(b)	(1)(A)(iii).			
4			search organiza me, city, and st	tion operated in conj ate:	junction v		spital de	scribed i	n section	170(b)(1)(A)(iii). E	nter the
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)										
6		A federal, sta	ate, or local gov	emment or governme	ental unit	describe	d in sect	ion 170(l	b)(1)(A)(v	1		
7		_		receives a substantia (1)(A)(vi). (Complete F	-	its suppo	ort from a	governn	nental uni	t or from	the genera	al public
8				i in section 170(b)(1)	-	Complete	Part II.)					
9				receives: (1) more th				m contrib	eutions, n	nembershi	ip fees, an	d gross
		receipts from	n activities relate	ed to its exempt funct	tions—su	bject to d	certain ex	ceptions	, and (2)	no more	than 33/3	% of its
			_	ent income and unre				-		511 tax	from bus	sinesses
		acquired by	the organization	after June 30, 1975.	See sec	tion 509((a)(2). (Co	omplete f	Part (II.)			
10		An organizat	ion organized a	nd operated exclusive	ely to test	t for publ	ic safety.	. See sec	tion 509	(a)(4) _L		
11	Z			nd operated exclusiv								
		- · · · · · · · · · · · · · · · · · · ·	-	blicly supported organ t describes the type								
		а 🛚 Туре	i b 🗆	Type!! c	: 🗆 Typ	e III-Fun	ctionally	integrate	đ	d Z	Type III-	Other
e	Ø	By checking	this box, I cert	ify that the organizat	tion is no	ot control	led direc	tly or inc	firectly b	y one or	more disc	qualified
				n managers and othe	r than on	e or more	publicly	supporte	ed organiz	zations de	scribed in	section
		509(a)(1) or s	section 509(a)(2)	-								
f		If the organi	zation received	a written determinati	ion from	the IRS	that it is	a Type	i, Type II	, or Type	III suppo	rting
		_	, check this box									. 🗆
9		Since Augus	t 17, 2006, has	the organization acce	epted any	gift or c	ontributio	on from a	my of the	•		
		following per	rsons?								r	
			•	r indirectly controls, e		_	•	th persor	is descri	bed in (ii)		
			. •	ning body of the supp		ganizatio	n? .				11g(j)	
			-	rson described in (i) a			<u>.</u>				11g(ii)	-
_		• •	-	of a person described	• • •						ttg(iii)	
<u>_ n</u>				ation about the support			 					
Q3		of supported	(ii) Ein	(iii) Type of organization (described on lines 1-9		organization sted in your		rou notify nization in		is the ton in col.	(vii) Amount of support	
				above or IRC section	governing	document?		cat. (i) of your		zed un the		
				(see instructions)	Yes	No	Yes	No No	Yes	S.?		
					163	RU	165	, rec	Tes	RU		
Che	ious steri	Elem Schoo	54-6001210			1	1		1			20787
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Total

20787

Par	Support Schedule for Org (Complete only if you check					and 170(b)(i)(A)(vi)
Sec	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	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge	,				,	
4	Total. Add lines 1 through 3						<u> </u>
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						<u> </u>
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	(4) 2000	(2, 2333	(4) 244.	(4) 2000	(0) 2000	1,7,700
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on					i i	()
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 .						Ł
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for organization, check this box and stop he	ne					
<u>Sec</u>	tion C. Computation of Public Su	pport Perce	ntage				
14	Public support percentage for 2009 (line	6, column (f) d	ivided by line 1	i, cotumn (f))		14	%
15	Public support percentage from 2008 Sci	hedule A, Part	II, line 14 .			15	<u>%</u>
16a	33% % support test - 2009. If the organic and stop here. The organization qualifies						
b	33% % support test - 2008. If the organization quality box and stop here. The organization quality			•			·
17a	10%-facts-and-circumstances test - 20 more, and if the organization meets the "facts-and-circum reads the "facts-and-circum"	acts-and-circu	mstances" test,	check this box	and stop here	. Explain in Parl	IV how the
b	10%-facts-and-circumstances test-2008 more, and if the organization meets the "facts-and-circumstances" the "facts-and-circumstances" and circumstances.	acts-and-circum	nstances" test, o	check this box	and stop here.	Explain in Part	IV how the
18	Private foundation. If the organization did	not check a be	ox on line 13, 16	a, 16b, 17a, or	17b, check this	box and see ins	tructions ▶ [

Schedule A (Form 990 or 990-EZ) 2009 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (c) 2007 (a) 2005 (b) 2006 (d) 2008 (e) 2009 (f) Totat Gifts, contributions, grants, membership fees received. (Do not include any "unusuat 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 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total Add lines 1 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 . . . c Add lines 7a and 7b Public support (Subtract line 7c from line 6.) Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 6 . . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less) section 511 taxes) from businesses acquired after June 30, 1975 . c 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 12 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, 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 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . 15 % Public support percentage from 2008 Schedule A, Part III, line 15 16 % Section D. Computation of Investment Income Percentage Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f) .

%

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Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 1 Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions	10;
,	•	

Schedule 1, part 1, line 16, Form 990EX 2009

Robious Elementary School PTA

EIN 52 1154118

Special Recognitions	34	
Fish Tank Supplies	25	
Bowling Night	618	
Fifth Grade Party	1397	
Monster Mash	2407	
PTA programs	474	
Whistlestart Fun Run	1336	
Whistlestop Carnival	7411	
Cultural Performances	1000	
Enrichment	163	
Hospitality/Staff Appreciation	2782	
Landscaping	200	
Name Plates	70	
Party Fund	2213	
Recycling	1348	
Reflections Literary Contest	62	
Scholarships	244	
Wellness and Fitness	415	
EL Grade Level Materials	6000	
Expeditionary Learning/Staff Development	8000	
Fifth Grade Commencement	87	
Language Arts	5000	
Professional Development	600	
Library - Boy Books	500	
Social Studies	350	
Summer Reading/Battle of the Books	250	