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Short Form Return of Organization Exempt From Income Tax

2009

OMB No. 1545-1150

Department of the Treasury Internal Revenue Service

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

➤ Sponsonng 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

co Ā	Fo	r the 2	2009 calenda	r year,	or tax year beginning	g July	1 ,20	009, and	ending	June :	30	, 20	10
Õ B	Che	ck if ap	plicable [.]	Please	C Name of organization				D			ication numbe	∍ Γ
ANNE	Add	dress ch		use IRS label or	Pinehurst Elementar	v School PTA					58-15	95624	
复具	=	me char	ige i	print or	Number and street (or F		livered to street addre	ss) Roc	om/suite E	Telephone	elephone number		
面上	=	tal retun minated		type. See	PO Box 729			1		9	10-29	5-6969	
OF	╡	nended r		Specific	City or town, state or co	ountry, and ZIP + 4			F	Group Ex			
온눈	≒			instruc- tions.	Pinehurst, NC 28370	- 0729				Number	-	853	5
문 r					ations and 4947(a)(1)	***	hle trusts must att	tach	G Accounti	na Method	: V	Cash A	
	•	Jecu	<i>011 30 1 (0)(0)</i> (npleted Schedule A (uon		pecify) ▶			, , , , , , , , , , , , , , , , , , ,
ಣ –					·	<u> </u>	<u> </u>				orgar	nization is no	<u> </u>
20 10	We	ebsite									-	lule B (Form 9	
ਛਂ ;				heck o	nly one) — 🗹 501(c) (3 \ ◀ (insert no.)	□ 4947(a)(1) or □	527	-	or 990-PF)		ulo B (1 0 m 1	550,
_												han \$25 000	Δ
r		eck ▶		_	zation is not a section to turn is not required, b			-				lan \$25,000.	^
7					9 to determine gross re						e e		670 00
'n		_			enses, and Char						e fo		678.98
	Par	_									T 10		200.00
		1			ts, grants, and simila						┼		300.00
		2	-		evenue including go					. 2	┼		
		3		•	and assessments					. 3	┼		
		4	Investment					, -		. 4	 		154.09
		5a			m sale of assets oth	•	_	5a	40	17.50		-	
		b			er basis and sales ex			5b			-		
	<u>"</u>	C	,	,	n sale of assets other	• ,			•		₩	4	017.50
	Revenue	6	•		tivities (complete applicat	•	•	gaming,	check here ►	니ㅣ			
	ਭੋ∣	а	Gross rever	nue (no	ot including \$	300.00 of	contributions			ļ			
f	윤		reported on	i line 1)			6a	178	47.64			
		b	Less: direct	exper	nses other than fund	draising expenses	[1	6b	33	73.40	_		
	ŀ	C	Net income	or (los	ss) from special eve	nts and activities (S	Subtract line 6b fr	om line	6a)	. <u>6c</u>		14	474.24
		7a	Gross sales	of inv	entory, less returns	and allowances .	[7a	83	59.75	1		
		b	Less: cost of	of goo	ds sold			7b	68	86.64	_		
		C	Gross profit	t or (lo	ss) from sales of inv	entory (Subtract Iir	ne 7b from line 7a)		. 7c		1	473.11
		8	Other reven	nue (de	scribe >					_) 8			
		9	Total rever	nue. A	dd lines 1, 2, 3, 4, 5	c, 6c, 7c, and 8 .				▶ 9	<u> </u>	20	418.94
_	Τ.	10			r amounts paid (atta								
	.	11			r for members .					. 11	Τ		
	<u>م</u>	12	•		mpensation, and en	nployee benefits .		CEIV	FD . !	. 12	T		
	.	13			and other payments		ontractors REC	<u> ۲۱۷</u>		. 13			
	ᇗ .	14			utilities, and mainte	•	1		2016	. 14	T		
1	×ı	15			ons, postage, and s		. 19 . JUL	27	7010 13	. 15			
		16	• • •		describe ▶ see atta		4		la	1) 16		26	568.38
		17	•	•	Add lines 10 throug					▶ 17			568.38
-		18			for the year (Subtra			משנו		. 18			149.44)
		19			d balances at begi			(A)) (m	ust agree v				
	<u> </u>				reported on prior y							29	707.02
	ي ا ڇ	20	•	-	net assets or fund b	-					1		964.03)
:	ž į	21		-	d balances at end of		-			▶ 21	\vdash		557.58
1	Pa				ets. If Total assets of						ad of		
					(See the instruction		, . ,,			ning of year	T	(B) End of year	
	22	Ca	eh eavinge	and in	vestments	•			12.0	29707.0	222		593.55
	23		and build							20,01.0	23		
	23 24		ner assets (d	_					 		24		
	24 25		tal assets (u						-	29707.0	\rightarrow	10	 593.55 (
	26		tal liabilities							29/01.0	26		
					palances (line 27 of	column (B) must a	gree with line 21\	,	-	29707.0	_	10	593.55
_	<u>27</u>	116	. assetts UI	.u.iu L	Calculated (IIIIC 27 Of	Coldini (D) most a	groo marme 21)			29/0/.0	461		555.55

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)						Expenses
What	t is the organization's primary exempt purpose?	Child Advocacy		_		ured for section
	ribe what was achieved in carrying out the org				501(c)(3) and 501(c)(4) nizations and section
	ner, describe the services provided, the number of	of persons benefited, and o	other relevant info	rmation for		(a)(1) trusts; optional
each	program title.					hers.)
28	Curriculum Assistance / Special Programs Assistance	ce - each teacher is given fun	ds to purchase cur	riculum item		
	not provided by other funding.					
		includes foreign grants, ch	eck here	. ▶ □	28a	7399.62
29	Campus Beautification / Picnic Tables / School Gard	en - projects to enhance sch	ool grounds and en	courage		
	outdoor activities and educational programs.				-	
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □	29a	5179.91
30	Accelerated Reader / Book Bucks - reward programs	encouraging students to rea	ad.]	
					1	
	(Grants \$) If this amount	includes foreign grants, ch	eck here	. ▶ □_	30a	3736.10
31	Other program services (attach schedule)					
		includes foreign grants, ch			31a	7322.41
32	Total program service expenses (add lines 28a				32	23638.04
Par	List of Officers, Directors, Trustees, and Ke	y Employees. List each one e	ven if not compensa	ated. (See the	ınstruc	ctions for Part IV.)
	(a) Name and address	(b) Title and average hours per week	(c) Compensation	(d) Contributio employee benefit	ns to	(e) Expense account and
	(a) Name and address	devoted to position	(If not paid, enter -0)	deferred comper		other allowances
Julle	Pitts					
25 In	verrary Road, Pinehurst, NC 28374	President		1		
Mark	Spain					
12 Ca	arter Lane, Pinehurst, NC 28374	Vice President		1		
Valer	ie Hawkins					
31 No	ortham Court, Pinehurst, NC 28374	Secretary		1		
Teri F	eggeler]				
23 MI	nikahada Trail, Pinehurst, NC 28374	Treasurer		1		
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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		V
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	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		1
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			
b	Did the organization file Form 1120-POL for this year?	37b		~
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		V
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
b	Gross receipts, included on line 9, for public use of club facilities	1		1
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	1		
	section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
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		•
С	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			
⊙ e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		~
41	List the states with which a copy of this return is filed. ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
	Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority			
	over a financial account in a foreign country (such as a bank account, securities account, or other financial		Yes	No
	account)?	42b	<u> </u>	~
	If "Yes," enter the name of the foreign country: ▶	ĺ		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	<u> </u>	/
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year	• •	•	▶ □
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ			v
	100, 1 Only 500 mast 50 completed instead of 1 only 500-LZ	45		

Part VI

Part \	Section 501(c)(3) organizations and s 501(c)(3) organizations and section 494 and complete the tables for lines 50 ar	47(a)(1) nonexempt char	xempt charitat table trusts mus	ble trusts only. A st answer question	l sec ns 46	tion 3–49t	-
46	Did the organization engage in direct or indirect	t political campaign activiti	es on behalf of o	r in opposition to		Yes	No
	candidates for public office? If "Yes," complete	Schedule C, Part I			46		~
47	Did the organization engage in lobbying activitie	s? If "Yes," complete Sche	dule C, Part II .		47		V
48	Is the organization a school as described in section	on 170(b)(1)(A)(ii)? If "Yes," c	omplete Schedule	E	48		V
49a	Did the organization make any transfers to an ex	cempt non-charitable relate	d organization? .		49a		~
b	If "Yes," was the related organization a section 5	527 organization?			49b		
50	Complete this table for the organization's five hi	ighest compensated emplo	yees (other than o	officers, directors, t	ruste	es an	d key
	employees) who each received more than \$100,						
	(a) Name and address of each employee paid more	(b) Title and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans &		Expen count a	
	than \$100,000	devoted to position		deferred compensation		allowa	
				:			
		1					
	Total number of other employees paid over \$100		<u> </u>	<u></u>	····		
	Complete this table for the organization's five \$100,000 of compensation from the organizatio	n. If there is none, enter "N	one."				
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) ⊤y	pe of service	(c) Cor	npensa	ition
		 					
							
- ,- ,	· · · · · · · · · · · · · · · · · · ·	······································					
·							
d	Total number of other independent contractors	each receiving over \$100.00	00▶				
		3 ,-					
	Under penalties of penjury, I declare that I have examinand belief, it is true, correct, and complete. Declaration	ed this return, including accompan of preparer (other than officer) is t	ying schedules and sta based on all information	atements, and to the bes	t of my	knowle wledge	edge e.
Sign Here	X Julie a Pitt Signature of officer X Julie A Pitt	s Presi	dent	V July o	31s	† ₂	010
	Type or print name and title	Doto	Check if	Preparer's identifying num	her (So		tions)
Paid	Preparer's signature	Date	self- employed ▶	. Topula stratelying full	(J C		JUN NO
Prepare			· · · · · · · · · · · · · · · · · · ·	<u>'l</u>			
Use On	y yours if self-employed),		EI D				
May th	address, and ZIP + 4 P e IRS discuss this return with the preparer show	n above? See instructions	[Pr	none no. ▶	Yes		No.
viay u	on to discuss this retain with the preparer show	above: Gee madedenons		For			(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

Department of the Treasury Inspection Internal Revenue Service Employer identification number Name of the organization 595624 Pinehurst 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.) ☐ 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 5 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). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 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.) 8 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 33/4 % 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. **b** Type II c ☐ Type III-Functionally integrated d Type III-Other a 🔲 Type I e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? 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). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col. support above or IRC section governing document? col. (i) of your (i) organized in the (see instructions)) support? U.S.? Yes No No Yes Yes Nο

Total

	Support Schedule for Org (Complete only if you chec					and	170(b)(1 	l)(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					└		
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4.					L		
	tion B. Total Support				,			
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e)	2009	(f) Total
7	Amounts from line 4			 		ļ		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	. 77.1. 7.1. 7.						
11	Total support. Add lines 7 through 10 .		<u> </u>			ļ i		
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	re	<u> </u>					
<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 11	l, column (f))		14		%_
15	Public support percentage from 2008 Sci	nedule A, Part	II, line 14 .			15	<u></u>	%
16a	331/s % support test - 2009. If the organiand stop here. The organization qualifies				line 14 is 33% 9	% or n	nore, che	ck this box
þ	33% % support test - 2008. If the organization quality box and stop here. The organization quality				and line 15 is			check this
17a	10%-facts-and-circumstances test - 20 more, and if the organization meets the "facts-and-circum organization meets the "facts-and-circum	acts-and-circui	mstances" test,	check this box	and stop here.	Expla	in in Part	IV how the
b 18	10%-facts-and-circumstances test – 2008 more, and if the organization meets the "facts-and-circumsta Private foundation. If the organization did	acts-and-circun inces" test. The	nstances" test, o organization qua	heck this box a difies as a public	and stop here. bly supported or	Explai ganiza	n in Part tion	IV how the

Schedule A (Form 990 or 990-EZ) 2009 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total grants, contributions. membership fees received. (Do not include 1479.00 2684.15 6536.34 3287.33 6006.66 19993.48 any "unusual grants.") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 77875.01 53129.49 89631.96 23243.61 20120.74 264000.81 organization's tax-exempt purpose . . . 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 The value of services or facilities furnished by a governmental unit to the organization without charge 79354.01 55813.64 96168.30 26530.94 26127.40 283994.29 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 283994.29 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 79354.01 55813.64 96168.30 26530.94 26127.40 283994.29 Amounts from line 6 . . . 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 123.69 186.19 190.31 149.19 72.52 721.90 **b** Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 123.69 186.19 190.31 149.19 72.52 721.90 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 Other income. Do not include gain or loss from the sale of capital assets 13 14 S 15 16 S

	(Explain in Part IV.)					ļ			
13	Total support. (Add lines 9, 10c, 11, and 12.)	79477.70	55999.83	96358.61	26680.13	2	6199.92	28471	16.19
14	First five years. If the Form 990 is for organization, check this box and stop		n's first, secon						3) ▶ □
Sec	tion C. Computation of Public Su								
15	Public support percentage for 2009 (lin	e 8, column (f)	divided by line	13, column (f))	15		99.7	%
16	Public support percentage from 2008 Schedule A, Part III, line 15				16		99.4	%	
Sec	tion D. Computation of Investmen	t Income Pe	rcentage						
17	Investment income percentage for 200	line 10c, colu	umn (f) divided	by line 13, co	olumn (f))	17		0.3	%
18	Investment income percentage from 20			•	• • • •	18		0.6	%
19a	331/3 % support tests - 2009. If the organism 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								
20	Private foundation. If the organization	did not check a	a box on line 14	1, 19a, or 19b,	check this bo	x and	l see instr	uctions I	<u> </u>
				-	Sche	dule A	(Form 990 c	or 990-EZ)	2009

Schedule A (Fo	orm 990 or 990-EZ) 2009				Page 4
Part IV	Supplemental Information. Part II, line 17a or 17b; and I	Complete this Part III, line 12.	part to provide the Provide any other	e explanations required additional information.	by Part II, line 10; See instructions.
		·			

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			·		
 ·					

Attachment 2009-2010

Pinehurst Elementary PTA Federal Tax ID#58-1595624 Form 990-EZ

Line 16

Line to	
Curriculum Assistance	•
AIG	
Art	\$500.00
Guidance	\$233.87
Media Center	\$436.09
Music	\$500.00
Orchestra	\$300.00
PE	\$492.43
Reading Recovery	\$150.00
Resource	\$291.79
Special Learning Center	\$127.77
Speech	
Accelerated Reader	\$2,160.15
Admin/Paper	\$425.51
Assistance Fund	\$100.00
Beautification	\$575.00
Book Bucks	\$1,575.95
Garden	\$300.00
Cultural Arts	\$2,000.00
EOG Study Island	\$2,737.10
Office Appreciation	
Principal	
Ready, Set, Go!	
Teacher/Staff Appreciation	
Miscellaneous	
	. ,
TOTAL	\$26,568.38

Attachment 2009-2010

Pinehurst Elementary PTA Federal Tax ID#58-1595624 Form 990-EZ

Line 31
Fall Festival
Students & families are provided a safe low-cost day of fun provided by teachers, staff and volunteers.
Reindeer Shop
Students are provided a way to shop for family members and/or friends. This is all run by volunteers.
Family Fitness Day\$95.53
Students & families are provided a day of physical activities and education activities about healthy living and nutrition.
Cultural Arts \$2,000.00
Students attend assemblies performed by national artists.
EOG Study Island\$2,737.10
A computer-based program to assist remedial students with preparing for end-of-grade tests.
Ready, Set, Go!\$202.97
Provided take-home supplies for at-risk students in preparation for entering kindergarten.
TOTAL \$7,322.41

07/14/2010 16:11 PEPATUR INCHETARY MONHAGASTARY STILLTIES HELF Checking Account Profile - BB&T Bank of North Carolina (102) - 0005214925941 - Open - Active Statement Information Account Info 07/30/2010 Last Statement Date 06/30/2010 **Next Statement Date** General Acct Info No Special Handling - Secial Number Order Disposition Easylmage - Items imaged with statement ☐ Combined Statement Exempt Check Disposition Balance Info Statement Info -Interest Information **Earned YTD** \$2.14 Rate 0.020% Service Charge Info \$0.00 **Earned Not Paid** 10.13 Withholding YTD Overdraft Info. \$7.14 SSN.TIN 58-1595624 **Earned Last Year** Fransaction History 133 - COMMUNITY INTEREST CHECKING Withholding Status Account with certified TIN Prime Code Pending Trans -Balance Information Related Clients \$25,265.33 12 mo. Average Collected Collected Available \$19,593.55 \$25,391.00 **Opening Collected Balance** \$19.593.55 12 mo. Average Balance 122,739.00 **Closing Collected Balance** \$19,593.55 12 mo. Loanable Balance -Float/Sweep Information-\$0.00 Other Float **One Day Float** \$0.00 \$0.00 Credit Line Sweep Available Investment Sweep Available \$0.00 Sweep Target Balance 90.00

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Attachment 2009-2010

Pinehurst Elementary PTA Federal Tax ID#58-1595624 Form 990-EZ

Line 6A	
Membership	\$1,386.20
Corporate Sponsorships	\$2,722.87
Fall Festival	
Fundraisers	\$2,166.00
Family Dining Nights	
Reindeer Shop	
Family Fitness Day	
Banking Corrections & Overpayment	\$79.99
TOTAL:\$	17,847.64
Line 6B	
Membership	\$731.50
Corporate Sponsorships	\$0.00
Fall Festival	\$1,336.81
Fundraisers	\$259.56
Family Dining Nights	\$0.00
Reindeer Shop	\$950.00
Family Fitness Day	\$95.53
Banking Corrections & Overpayment	\$0.00
TOTAL	\$3,373.40
Line 7A	A. 5 0.00
Spirit Wear	-
Yearbook	\$6,573.50
TOTAL	\$8,359.75
Line 7B	
Spirit Wear	•
Yearbook	\$5,257.64
TOTAL	\$6,886.64