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Department of the Treasury Internal Revenue Service

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

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

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009

Open to Public Inspection

A 101 life 2003	calendar year, or tax year beginning 07/01/09, and ending 06/	30/10	J		
B Check if applicable Address change	Please C Name of organization use IRS Ranch Heights Elementary PTO			D Empl	oyer identification number
	label or print or Doing Business As			73-	-1327882
Name change	type. Number and street (or P O box if mail is not delivered to street address)	T	Room/suite	7	hone number
Initial return	See   5100 David Dr				
Termination	Instruc- City or town, state or country, and ZIP + 4	•	_	G Gross rec	eipts 5 55,449
Amended return	tions. Bartlesville OK 74006				· <del></del>
Application pendir	F Name and address of principal officer			H(a) Is this	a group return for
				affiliat	
				H(b) Are al includ	ed? Yes N
				If "No,	attach a list (see instructions)
I Tax-exempt st			· · · ·	┨	
J Website: ►  K Type of organizat		<del></del>		H(c) Group	exemption number
	on X Corporation   Trust   Association   Other ►  Summary	<u> </u>	ear of formation		M State of legal domicile
	describe the organization's mission or most significant activities				
	provide support and funding for programs that	രവിർ	not othe	rwice l	he
o pr	ovided by the school district.	coura	1100 00110	21W156 1	56
TO pr  2 Check 3 Numb 4 Numb 5 Total 6 Total	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
2 Check	this box ▶ ☐ if the organization discontinued its operations or disposed of more	e than 25	% of its net as	ssets	
3 Numb	er of voting members of the governing body (Part VI, line 1a)	oa 20	75 Of No flot at	з	8
a 4 Numb	er of independent voting members of the governing body (Part VI, line 1b)			4	8
5 Total	number of employees (Part V, line 2a)			5	0
ラ 6 Total	number of volunteers (estimate if necessary)			6	200
	gross unrelated business revenue from Part VIII, column (C), line 12			7a	
<b>b</b> Net ur	related business taxable income from Form 990-T, line 34			7b	
		-	Prior Y		Current Year
8 Contri	butions and grants (Part VIII, line 1h)	-		1,078	1,790
<b>0</b> 1	am service revenue (Part VIII, line 2g)	-	4	17,609	53,650
10 Invest	ment income (Part VIII, column (A), lines 3, 4, and 7d)	-		16	9
	revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	}		8,703	EE AAC
li e	revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) s and similar amounts paid (Part IX, column (A), lines 1–3)			10,703	55,449
14 Dane	the park to properly and the properly and the park to	<b>-</b>			
45 0-1	es, other compensation, employee benefits (Part IX, column (A), line 4) essional fundraising fees (Part IX, column (A), line 1 (e)	ا ∫ي <sub>د</sub>			
16a Profes	ssional fundraising fees (Part IX, column (A), line 11e)	18/ E	·		
b Total	undraising expenses (Part IX_column (D)_line 25)	165/			
道 17 Other	expenses (Part IX, column (A), lines 11a-11d, 11f-2	1891		6,591	52,371
18 Total		200		6,591	52,371
19 Rever	expenses Add lines 13–17 (must equal Part IX, column (A), line 25)  sue less expenses Subtract line 18 from line 12			7,888	3,078
s Off			Beginning of C		End of Year
हर्षे 20 Total	assets (Part X, line 16)	-	-	7,873	10,956
<b>EQ. (1)</b> 11 TAHAL	iabilities (Part X, line 26)	-		7 073	10.05/
				7,873	10,956
,	sets or fund balances Subtract line 21 from line 20				
C <sup>훈</sup> 記 22 Net as Part II	Signature Block				
Part II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying s	schedules d on all info	and statements,	and to the be	est of my knowledge any knowledge
Part II	Signature Block	schedules d on all info	and statements, rmation of which	and to the be	est of my knowledge s any knowledge
Part II	Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based.	schedules d on all info	and statements, rmation of which	and to the be	any knowledge - 9-70
Part II	Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based Signature of officer	d on all info	rmation of which	and to the be	any knowledge - 9-70
Part II	Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based.  Signature of officer	schedules d on all info	rmation of which	and to the be	any knowledge 1-9-10.
Part II	Signature Block  Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based  Signature of officer  Jeff Henry  Type or print name and title	resic	dent	and to the be n preparer has Daje	y - 9 - 10 .
Part II	Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based  Signature of officer  Jeff Henry  Type or print name and title  Preparer's	Presic	dent	and to the be n preparer has Daje	Preparer's identifying number (see instructions)
Part II Sign Here Paid Preparer's	Under penalties of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based.    Sumatire of officer   Properer's signature   Properer's signature   Properer's   Properer's	resic	dent	and to the be n preparer has Daje	Preparer's identifying number (see instructions)  P00121285
Part II Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based  Suphatore of officer  Jeff Henry  Type or print name and title  Preparer's signature  Archambo & Mueggenborg, PC	Presic	dent	and to the be n preparer has  Daje  k if  EIN	Preparer's identifying number (see instructions)  P00121285
Part II Sign Here Paid Preparer's	Under penalties of perjury, I declare that I have examined this return, including accompanying and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based.  Signature of officer  Jeff Henry  Type or print name and title  Preparer's signature  Archambo & Mueggenborg, PC if self-employed).  Archambo & Self-employed.	Presional Date	dent	and to the be n preparer has  Daje  k if  byed  EIN  Phone	Preparer's identifying number (see instructions) P00121285 73-1439902
Part II Sign Here Paid Preparer's Use Only	Under penalties of perjury, I declare that I have examined this return, including accompanying sand belief, it is true, correct, and complete Declaration of preparer (other than officer) is based  Signature of officer  Jeff Henry  Type or print name and title  Preparer's signature  Archambo & Mueggenborg, PC if self-employed),  302 SE Osage Ave.	Presional Date	dent	and to the be n preparer has  Daje  k if  byed  EIN  Phone	Preparer's identifying number (see instructions)

Part III Statement of Program  Briefly describe the organization's miss			Page 2
Briefly describe the organization's miss	Service Accomplishments		
To provide support as provided by the school	nd funding for program	ns that could not othe	erwise be
	nificant program services during the year wh	uch were not listed on	
the prior Form 990 or 990-EZ?  If "Yes," describe these new services of	on Schedule O		Yes X No
services?	, or make significant changes in how it condu	ucts, any program	Yes X No
Section 501(c)(3) and 501(c)(4) organia	ments for each of the organization's three lar zations and section 4947(a)(1) trusts are req is, and revenue, if any, for each program sen	urred to report the amount of grants and	
expenses related to	the classroom		
school that would ot	48,555 including grants of \$ support for programs: herwise not be availal	ble. Activities	)
supported include 5t supplies and other s	h grade field trip, co tudent assistance	omputer lab	
		) (Revenue \$	
supplies and other s	tudent assistance		
supplies and other s	tudent assistance		
supplies and other s  4c (Code. ) (Expenses \$	including grants of \$		
supplies and other s	including grants of \$		

	rt IV Checklist of Required Schedules			age C
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	Х	7.5
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			<b>.</b>
	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			X
5	Schedule C, Part II  Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	4_		
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have	- <del>-</del>		
•	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	İ		
	VII, VIII, IX, or X as applicable	11		X
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	i		
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
_	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X	ļ		
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		х
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No	<u> </u>		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	1		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		x
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			<b> </b> _
	If "Yes," complete Schedule G, Part III	19	<u> </u>	X
20	Did the organization operate one or more hospitals? If "Yes." complete Schedule H	20	I	X

	arty Checkist of required Concurred (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			v
^^	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	-	<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the	20		x
22	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III  Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		x
24a	employees? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23		
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines	1		
		24a	i	x
<b>.</b>	24b through 24d and complete Schedule K. If "No," go to line 25	24b		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
d 25a		240		
20a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
<b>L</b>	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	23a		
þ	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	]		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	250		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	120		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?	1		i
	If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<u> </u>		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	-		
	Schedule L, Part IV	28b		x
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c	i	x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	1		}
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		ļ	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	]	]	]
	19? Note. All Form 990 filers are required to complete Schedule O	38	X_	L
		Forr	ո 990	(2009)

Pa	Try Statements Regarding Other IRS Filings and Tax Compliance						
	5 to 11 to 12 to 1					Yes	No
та	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	,	0				
b	U.S. Information Returns. Enter -0- if not applicable.  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1a 1b	0	<del></del>	-	l	
	Did the organization comply with backup withholding rules for reportable payments to vendors and rep		_	-	┪ ┃		
·	gaming (gambling) winnings to prize winners?	Jortabi			1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	[ ]	1				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	Ιo				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur				2b	İ	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see						
	instructions)						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	d by					
	this return?				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		-				
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial					7.5
	account)?				4a		X
b	If "Yes," enter the name of the foreign country  See the metric tree for expectations and filling requirements for Form TD F 90.23.1. Benefit of Foreign	Donk					
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign and Financial Accounts	рапк					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.	tion?			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega						
	Prohibited Tax Shelter Transaction?	J			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th	e					
	organization solicit any contributions that were not tax deductible?				6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or					
	gifts were not tax deductible?				6b		
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	goods			_		
L.	and services provided to the payor?				7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				7b		
·	required to file Form 8282?	ıs			7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	l		'		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p		al	_			
	benefit contract?				- 7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?			7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?				7 <u>g</u>		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	as					
	required?				7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting						
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
9	organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.				8		
a	Did the organization make any taxable distributions under section 4966?				9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?				9b		
10	Section 501(c)(7) organizations. Enter						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter				7		
а	Gross income from members or shareholders	11a	<u> </u>		_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them )	11b		···	4		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1 1	1		12a		├—
<u> </u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					(2000

Bartlesville OK 74006

State the name, physical address, and telephone number of the person who possesses the books and records of the

5100 SE David Dr

policy, and financial statements available to the public

organization > Rachel Netemeyer

DAA

918-333-54<u>89</u> Form 990 (2009)

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees, and former such persons

Check this box if the organization (A)	(B)			(0	<b>;</b> )			(D)	(E)	(F)
Name and Title	Average hours per week	ndividual trustee or director		Officer		Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Jeff Henry										
Co-President	2.00	X		x		<u> </u>		0	0	0
Tonia Foust		l		l						
Co-President	2.00	X	<u> </u>	X	_	_	_	<u> </u>	0	O
Shelby Parsons	2 22			٠.				_	^	•
Vice-Pres	2.00	X	_	X	_			0	0	0
Rachel Netemeyer	2 00	7.						0	0	o
Treasurer Michelle Rafferty	2.00	X	ļ	X		┢			<u> </u>	
-	2.00	$ \mathbf{x} $	l	x		İ		o	0	0
Secretary	2.00	^		^	-	╁╾	-			
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		+	<del> </del>	1	1	1	-		<u> </u>	<del> </del>
	1	1	1	1	1	1	1		1	1

Form 990 (2009) Ranch Heights Elementary PTO Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (A) (C) (B) (D) (E) (F) Name and Title Average Position (check all that apply) Reportable Reportable Estimated hours per compensation compensation amount of Individual trustee or director Officer Highest compensated employee Former Institutional trustee Key employee week from from related other the organizations compensation organization (W-2/1099-MISC) from the (W-2/1099-MISC) organization and related organizations 1b Total Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization > 0 Yes No Did the organization list any former officer, director or trustee, key employee, or highest compensated X employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization (A) Name and business address (B)
Description of services (C) Compens Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization Form **990** (2009)

Pa	t VI	II Statement of Reve	nue						- rage c
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s s	1a	Federated campaigns	1a				Tevende		312, 313, 01 314
Program Service Revenue Contributions, gifts, grants and other similar amounts		Membership dues	1b						
g,E		Fundraising events	1c			ļ			
ar a		Related organizations	1d						
S,E		Government grants (contributions)	1e			:			
<u> </u>		All other contributions, gifts, grants,						Ì	
캶	-	and similar amounts not included above	1f		1,790				
들	g	Noncash contributions included in lines 1a-		<u> </u>					
유입	-	Total. Add lines 1a-1f			▶ 1	1,790			
e e					Busn. Code				
ē	2a	Cookie dough sales				28,925	28,925	_	
æ	b	Library fund				7,472	7,472		
္မည္	С	Discount cards				4,532	4,532		
હું	d	Pickles & popcorn				3,614	3,614		
Ĕ	е	Spirit sales				3,574	3,574		
ğ	f	All other program service reve	nue			5,533	5,533		
ď	g	Total. Add lines 2a-2f			<b>•</b>	53,650			
	3	Investment income (including	dıvıder	ds, intere	st, and	•			<del></del>
		other similar amounts)			▶	9	9		
	4	Income from investment of tax	-exem	pt bond p	roceeds ▶				
	5	Royalties			<b>&gt;</b>	· · · · · · · · · · · · · · · · · · ·			
		(ı) Real		(II) P	'ersonal				
	6a	Gross Rents							
	b	Less rental exps							
	С	Rental inc. or (loss)							
	d 7a	Net rental income or (loss) Gross amount from (i) Securities			<b>•</b>				
	1 a	sales of assets (i) Securities	5	(11)	Other				
		other than inventory							
	ь	Less cost or other							
		basis & sales exps		<b>.</b>					
	C	Gain or (loss)		<u> </u>					
	d	Net gain or (loss)	. 1		<b>•</b>				<del></del>
e	8a	Gross income from fundraising eve	nts						
en		(not including \$							
Rev		of contributions reported on line 1c							
Other Revenue		See Part IV, line 18	a						
ğ		Less direct expenses	b						
		Net income or (loss) from fund		y events	•	-			
	ча	Gross income from gaming activities							
i		See Part IV, line 19	a b						
		Less direct expenses	-	tu atroo		· · · · · -	<u> </u>		
		Net income or (loss) from garr Gross sales of inventory, less		livilles		<del></del>			
	iva	returns and allowances							
	<b>h</b>	Less cost of goods sold	a i b						
		Net income or (loss) from sale	_	venton/					
	Ť	Miscellaneous Revenue		ventory	Busn. Code		-		
	11a				3333				
	b						_		
	c					<del></del>			
	d	All other revenue							<del></del>
	e	Total. Add lines 11a-11d			<b>•</b>				
	12	Total Revenue. See instruction	ons		▶	55,449	53,659	0	0

Part-IX Statement of Functional Expenses

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

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

Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16			<del></del>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
0	and section 403(b) employer contributions)				
9 10	Other employee benefits Payroll taxes		·		
10 11	Fees for services (non-employees)	<u> </u>			
ii a	Management				
b	Legal			· · · · ·	
c	Accounting				
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	<u> </u>			
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	_			
20	Interest			<del></del> -	-
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below		15 250		
a	Cookie dough	15,358	15,358		
b	Library fund	7,593	7,593		
C	Technology Teacher stipends	7,022	7,022 3,400		
d	Spirit sales	3,369	3,369		<del></del>
e f	All other expenses	15,629		<u> </u>	<del>                                     </del>
25	Total functional expenses. Add lines 1 through 24f		52,371		
26	Joint costs. Check here ▶ If following	,-,-	,	····	
	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				

Part )	( Balance Sheet		(A)	$-\tau$	(0)
			Beginning of year		( <b>B)</b> End of year
1	Cash—non-interest bearing	<del></del> -	7,873	1	10,956
2	Savings and temporary cash investments			2	
3	Pledges and grants receivable, net			3	
4	Accounts receivable, net			4	
5	Receivables from current and former officers, directors, t	tructage kay			
"	employees, and highest compensated employees Comp	-		ı	
	Schedule L	nete rait ii oi		5	
6	Receivables from other disqualified persons (as defined	under section		<del></del>	
"	4958(f)(1)) and persons described in section 4958(c)(3)(l				
	Part II of Schedule L	B) Complete	+	اء	
2 ] _	Notes and loans receivable, net			6	
7 8	Inventories for sale or use			7	<del></del>
8				8	
9	Prepaid expenses and deferred charges	1 1		9	
10a	Land, buildings, and equipment cost or	10-		1	
١.	other basis Complete Part VI of Schedule D	10a		40-	
	Less accumulated depreciation	10b		10c	
11	Investments—publicly traded securities			11	
12	Investments—other securities See Part IV, line 11			12	
13	Investments—program-related See Part IV, line 11		-	13	<del>.</del>
14	Intangible assets		· · · · · · · · · · · · · · · · · · ·	14	
15	Other assets See Part IV, line 11		7 073	15	10 05
16	Total assets. Add lines 1 through 15 (must equal line 34	·)	7,873		10,956
17	Accounts payable and accrued expenses			17	<del></del>
18	Grants payable			18	
19	Deferred revenue			19	
20	Tax-exempt bond liabilities			20	
Ciabilities 52	Escrow or custodial account liability. Complete Part IV o			21	
<b>≝</b>   <sup>22</sup>	Payables to current and former officers, directors, truste	•			
<u>a</u>	employees, highest compensated employees, and disqu	alified			
<b>5</b>	persons Complete Part II of Schedule L			22	
23	Secured mortgages and notes payable to unrelated third	•		23	<del></del> -
24	Unsecured notes and loans payable to unrelated third pa	arties		24	
25	Other liabilities Complete Part X of Schedule D			25	
26	Total liabilities. Add lines 17 through 25			26	<del> </del>
G	Organizations that follow SFAS 117, check here ▶ X	and			
בַ	complete lines 27 through 29, and lines 33 and 34.				
<u>e</u>   27	Unrestricted net assets		7,873	27	10,95
28	Temporarily restricted net assets			28	
<b>2</b> 9   29	,			29	
죠	Organizations that do not follow SFAS 117, check her	re ▶ 📗			
5	and complete lines 30 through 34.				
တ္ 30				30	
<b>9</b> 31	Paid-in or capital surplus, or land, building, or equipmen	t fund		31	
Assets or Fund Balances 25 25 30 31 32	Retained earnings, endowment, accumulated income, o	r other funds		32	
를 33 34	Total net assets or fund balances		7,873		10,956
Z 34	Total liabilities and net assets/fund balances		7,873	34	10,956

Form **990** (2009)

Form	990 (2009) Ranch Heights Elementary PTO 73-1327882		Pa	ge <b>12</b>
	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	_ [ _ ]		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			l
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ĺ
	issued on a consolidated basis, separate basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		<u> </u>
		Form	990	(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

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Ranch Heights Elementary PTO

Employer identification number 73-1327882

Pa	rt I	Reaso	on for Public Charity	Status (All organizations	must c	omplete	e this i	oart.) S	See in	struct	ions.			
				e it is (For lines 1 through 11, c				<b>,</b>					_	
1			•	ociation of churches described i			-							
	H	•	•		iii scotion	170(0)(1	<b>//</b> _///·							
2	Н		cribed in section 170(b)(1)(			L\/4\/A\/:	::\							
3	$\vdash$	•	, ,	ce organization described in sec			•							
4	Ш			d in conjunction with a hospital of	jescribed	ın sectioi	n 170(b)	(T)(A)(II	ıı). ⊏nte	r the no	ospitars na	me,		
		city, and state								_				
5		•	•	of a college or university owned	or operate	ed by a go	overnme	ntal uni	t descri	bed in				
		section 170(l	b)(1)(A)(iv). (Complete Part	II )										
6		A federal, sta	te, or local government or g	overnmental unit described in <b>s</b>	ection 17	0(b)(1)(A)	)(v).							
7		An organization	on that normally receives a	substantial part of its support fro	om a gove	ernmental	unit or f	rom the	genera	I public				
		described in section 170(b)(1)(A)(vi). (Complete Part II)												
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	X	An organizati	on that normally receives (	I) more than 33 1/3 % of its sup	port from	contributi	ons, me	mbersh	ıp fees,	and gro	oss			
		receipts from	activities related to its exen	npt functions—subject to certain	exception	ns, and (2	) no mo	re than	33 1/3 <sup>c</sup>	% of its				
		support from	gross investment income ar	nd unrelated business taxable in	come (les	s section	511 tax	) from b	usines	ses				
		acquired by th	he organization after June 3	0, 1975 See section 509(a)(2).	(Comple	te Part III	)							
10			-	exclusively to test for public safe										
11	H	-		exclusively for the benefit of, to				to carry	out the	9				
	ш	-	-	ed organizations described in s				-			ì			
				he type of supporting organizati										
		a Type		c Type III–Function			d [	-	e III–Ot	her				
е				janization is not controlled direc	, ,									
·	Ш	,	-	and other than one or more put	-	• •					1			
		•	section 509(a)(2)	and only many one or more par	omery compr						•			
f				ermination from the IRS that it is	a Type I	Type II (	or Type	III suppo	ortina					
•		-	check this box		, a . , po .,	. , , , ,	<del>, , , , , , , , , , , , , , , , , ,</del>	одрр	J. 1.1.19					П
_		•		tion accepted any gift or contrib	ution from	any of th	۱۵							
g		•		tion accepted any girt of contrib	anon non	i any or ii	16							
		following per						\				٢	V	- N-
		., .	•	ontrols, either alone or together	with perso	ons descr	inea in (	II <i>)</i>				_	Yes	No
			• • •	f the supported organization?								g(i)		-
		•	member of a person descri									g(II)		
		` '	•	described in (i) or (ii) above?							[11]	g(III)		L
h			following information about t	he supported organization(s)	T				<del></del>					
(1)		e of supported	(II) EIN	(iii) Type of organization	1	organization		rou notify nization in	' '	ls the			unt of	
	org	anization		(described on lines 1–9 above or IRC section		sted in your 1 document?		of your	organizat (I) organi	zed in the		suppo	JΓL	
				(see instructions))		<del>,</del>		oort?		S?				
					Yes	No	Yes	No	Yes	No				
									<u> </u>					
					<del> </del>				ļ	<u> </u>				
					+	-			<u> </u>	<u> </u>				
_														
			-			-			<u> </u>	<del>                                     </del>				-
Tota	ıl										Į			

	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	<u> </u>	<u> </u>		<u> </u>	<u> </u>	. <u></u>
	tion B. Total Support			<b>.</b> =			
Cal	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						· · · · · · · · · · · · · · · · · · ·
10 11	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. Add lines 7 through 10						
11 12	Gross receipts from related activities, etc	(aaa inatri lationa)	_ <u>1</u>	1		12	
13	First five years. If the Form 990 is for the			urth or fifth tax vo	ar as a soction EO	L	
13	organization, check this box and stop her	0	st, second, triird, to	urur, or murtax ye	ai as a section so	1(0)(3)	▶ □
Sec	tion C. Computation of Public St		ntage				
14	Public support percentage for 2009 (line 6			nn (f))		14	%
15	Public support percentage from 2008 Sch		-	(7)		15	%
16a	33 1/3 % support test—2009. If the organ			13. and line 14 is	33 1/3 % or more.	check this box	
	and stop here. The organization qualifies						▶ [
b	33 1/3 % support test—2008. If the organ	. ,	•		15 is 33 1/3 % or i	more, check this	_
	box and stop here. The organization qual	fies as a publicly	supported organiza	ation		·	▶ [
17a	10%-facts-and-circumstances test—200	9. If the organizat	tion did not check a	box on line 13, 1	6a, or 16b, and line	e 14 is 10% or	<u>-</u>
	more, and if the organization meets the "fa	acts-and-circumst	ances" test, check	this box and stop	here. Explain in P	art IV how the	
	organization meets the "facts-and-circums	tances" test. The	organization qualif	ies as a publicly s	supported organiza	tion	▶ [
b	10%-facts-and-circumstances test—200	8. If the organizat	tion did not check a	box on line 13, 1	6a, 16b, or 17a, ar	nd line 15 is 10% or	
	more, and if the organization meets the "fa	acts-and-circumst	ances" test, check	this box and stop	here. Explain in P	art IV how the	
	organization meets the "facts-and-circums	stances" test. The	organization qualif	ies as a publicly s	supported organiza	tion	▶ [
18	Private foundation. If the organization did	l not check a box	on line 13, 16a, 16	b, 17a, or 17b, ch	eck this box and s	ee instructions	▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you che	cked the box	on line 9 of Pa	art I.)			
	tion A. Public Support			<del>,</del>			
Cal	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")			2,504	_ 1,078	1,790	5,372
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			51,347	47,609	54,573	153,529
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5			53,851	48,687	56,363	158,901
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		Ì				
	amount on line 13 for the year	<u> </u>	1			<del></del>	
	Add lines 7a and 7b			<del> </del>	-		
8	Public support (Subtract line 7c from line 6)						158,901
	tion B. Total Support	· · ·					
Ca	lendar year (or fiscal year beginning in) ▶	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6			53,851	48,687	56,363	158,901
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			89	16	9	114
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b			89	16	9	114
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)			53,940	48,703	56,372	159,015
14	First five years. If the Form 990 is for the organization, check this box and stop here	•	st, second, third, fo	ourth, or fifth tax year	as a section 501	(c)(3)	<b>&gt;</b> [
Sec	tion C. Computation of Public Sເ	upport Percer	ntage				
15	Public support percentage for 2009 (line 8	e 8, column (f) divided by line 13, column (f))					99.93%
16							99.00%
Sec	ction D. Computation of Investme				<del>.</del>	17	
17	Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))						<u>%</u>
18	Investment income percentage from 2008						1 %
19a	33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization						
b	33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization						

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

Page 4

Schedule A (Form 990 or 990-EZ) 2009 Ranch Heights Elementary PTO 73-1327882

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

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990

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

Attach to Form 990.

OMB No 1545-0047
2009
Open to Public

Inspection

Name of the organization

Ranch Heights Elementary PTO

Employer identification number

73-1327882

Form 990, Part I, Line 6

Parents volunteer in the classroom and on field trips and other functions

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 Reviewed by treasuer prior to submission of Form 990.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Made available upon request.