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Form **990-EZ**Department of the Treasury  
Internal Revenue Service**Short Form**  
**Return of Organization Exempt From Income Tax**Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code  
(except black lung benefit trust or private foundation)

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No 1545-1150

**2009****Open to Public  
Inspection****A** For the 2009 calendar year, or tax year beginning **July 1**, 2009, and ending **June 30**, 20 **10****B** Check if applicable:

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Terminated
- ☐ Amended return
- ☐ Application pending

Please  
use IRS  
label or  
print or  
type.  
See  
Specific  
Instruc-  
tions**C** Name of organization**Cherry Creek School District Parent Teacher- Fox Hollow PTO**

Number and street (or P O box, if mail is not delivered to street address) Room/suite

**6363 S. Waco St**

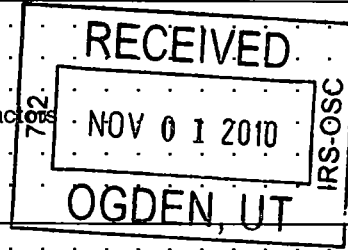
City or town, state or country, and ZIP + 4

**Aurora, CO 80016****D** Employer identification number**84-1595506****E** Telephone number**720-886-8700****F** Group ExemptionNumber ▶ **7207**

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

**G** Accounting Method: ☒ Cash ☐ Accrual  
Other (specify) ▶**I** Website: ▶ **foxxhollowelem.com****J** Tax-exempt status (check only one) — ☒ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527**H** Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).**K** Check ☐ 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.**L** 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 ▶ \$ **93,840.09****Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	<b>14,819.15</b>
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	<b>6,285.25</b>
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	
	<b>4</b>	Investment income . . . . .	<b>4</b>	
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	
	<b>b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	
	<b>c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	
	<b>6</b>	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	<b>a</b>	Gross revenue (not including \$ _____ of contributions reported on line 1) . . . . .	<b>6a</b>	<b>72,735.69</b>
	<b>b</b>	Less: direct expenses other than fundraising expenses . . . . .	<b>6b</b>	<b>20,519.59</b>
<b>c</b>	Net income or (loss) from special events and activities (Subtract line 6b from line 6a) . . . . .	<b>6c</b>	<b>52,216.10</b>	
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>		
<b>b</b>	Less: cost of goods sold . . . . .	<b>7b</b>		
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>		
<b>8</b>	Other revenue (describe ▶ _____)	<b>8</b>		
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 . . . . .	<b>9</b>	<b>73,320.5</b>	
Expenses	<b>10</b>	Grants and similar amounts paid (attach schedule) . . . . .	<b>10</b>	<b>56,128.51</b>
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	<b>13154.08</b>
	<b>16</b>	Other expenses (describe ▶ _____)	<b>16</b>	<b>3043.08</b>
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . .	<b>17</b>	<b>72325.67</b>
Net Assets	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	<b>994.83</b>
	<b>19</b>	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) . . . . .	<b>19</b>	<b>7209.99</b>
	<b>20</b>	Other changes in net assets or fund balances (attach explanation) . . . . .	<b>20</b>	
	<b>21</b>	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20 . . . . .	<b>21</b>	<b>8204.82</b>

**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	(B) End of year
<b>22</b> Cash, savings, and investments . . . . .	<b>7209.99</b>	<b>8204.82</b>
<b>23</b> Land and buildings . . . . .		
<b>24</b> Other assets (describe ▶ _____)		
<b>25</b> <b>Total assets</b> . . . . .	<b>7209.99</b>	<b>8204.82</b>
<b>26</b> <b>Total liabilities</b> (describe ▶ _____)		
<b>27</b> <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21) . . . . .	<b>7209.99</b>	<b>8204.82</b>

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

Cat No 106421

Form **990-EZ** (2009)

SCANNED NOV 29 2010

P 2

## Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	Elementary and Secondary Education Allocate Funds to provide Teacher aids for all grade levels at Fox Hollow Elementary school. Aids enhance the educational experience and support learning for all students at Fox Hollow (Approximately 820 Students)		
	(Grants \$ 30,000 ) If this amount includes foreign grants, check here . . . . . <input type="checkbox"/>	28a	30,000
29	Elementary and Secondary Education provide support for technology, media and integrated arts at Fox Hollow Elementary. Provides support for teachers to enhance their instructions for all students at fox Hollow. (approximately 905 students and staff)		
	(Grants \$ 10,696.07 ) If this amount includes foreign grants, check here . . . . . <input type="checkbox"/>	29a	10,696.07
30	Elementary and Secondary Education- assemblies provide entertaining and instructive content to students on various topics. Designed to enhance classroom instruction as well as motivate students to learn in different ways. Provides 6 assemblies for all grades (approximately 820 students)		
	(Grants \$ 2,378 ) If this amount includes foreign grants, check here . . . . . <input type="checkbox"/>	30a	2,378
31	Other program services (attach schedule) . . . . . <input type="checkbox"/>		
	(Grants \$ ) If this amount includes foreign grants, check here . . . . . <input type="checkbox"/>	31a	14,173.08
32	<b>Total program service expenses</b> (add lines 28a through 31a) . . . . . <input type="checkbox"/>	32	57,247.15

[illegible]

**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

		Yes	No
<b>33</b>	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .		✓
<b>34</b>	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .		✓
<b>35</b>	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.		
<b>a</b>	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? . . . . .		✓
<b>b</b>	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .		✓
<b>36</b>	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 . . . . .		
<b>37a</b>	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b> _____		
<b>b</b>	Did the organization file <b>Form 1120-POL</b> for this year? . . . . .		✓
<b>38a</b>	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? . . . . .		✓
<b>b</b>	If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . . <b>38b</b> _____		
<b>39</b>	Section 501(c)(7) organizations. Enter:		
<b>a</b>	Initiation fees and capital contributions included on line 9 . . . . . <b>39a</b> _____		
<b>b</b>	Gross receipts, included on line 9, for public use of club facilities . . . . . <b>39b</b> _____		
<b>40a</b>	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
<b>b</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 . . . . .		✓
<b>c</b>	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 . . . . . ▶ _____		
<b>d</b>	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ _____		
<b>e</b>	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. . . . .		✓
<b>41</b>	List the states with which a copy of this return is filed. ▶ _____		
<b>42a</b>	The organization's books are in care of ▶ _____ Telephone no. ▶ _____ Located at ▶ _____ ZIP + 4 ▶ _____		
<b>b</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 account)? . . . . .	Yes	No
	If "Yes," enter the name of the foreign country: ▶ _____		✓
	See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b>	At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .		✓
	If "Yes," enter the name of the foreign country: ▶ _____		
<b>43</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b> _____		
<b>44</b>	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	Yes	No
			✓
<b>45</b>	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 . . . . .		✓

**Part VI** **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- 46** Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . . **46** ☐ **Yes** ☒ **No**
- 47** Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . . **47** ☐ **Yes** ☒ **No**
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . . **48** ☐ **Yes** ☒ **No**
- 49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . . **49a** ☐ **Yes** ☒ **No**
- b** If "Yes," was the related organization a section 527 organization? . . . . . **49b** ☐ **Yes** ☒ **No**
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

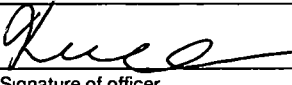
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**f** Total number of other employees paid over \$100,000 . . . . . **f** \_\_\_\_\_

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . **d** \_\_\_\_\_

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	 Signature of officer		Date <u>10/20/10</u>	
	Type or print name and title <b>Kimberly Armitage, President</b>			
<b>Paid Preparer's Use Only</b>	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN		Phone no

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ☐ **Yes** ☒ **No**



**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10 . . . . .						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First five years.</b> 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 <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3 % support test—2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 33 1/3 % support test—2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

**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
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	0	0	14,308	15,068	14,891	44,609
<b>2</b> 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	124,516	123,358	121,499	72,528	78,948	645,895
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	00	0	0	0	0	0
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge	0	00	0	0	0	0
<b>6 Total.</b> Add lines 1 through 5	124,516	123,358	135,807	87,596	93,840	690,328
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (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
<b>9</b> Amounts from line 6	124,516	132,358	135,807	87,596	93,840	690,328
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						690,328
<b>14 First five years.</b> 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 <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	100 %
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15	16	100 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

- 19a 33⅓ % support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33⅓ %, and line 17 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☒
- b 33⅓ % support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33⅓ %, and line 18 is not more than 33⅓ %, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► ☐



**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.

[illegible]

Department of the Treasury  
Internal Revenue Service

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

2009

**Open To Public Inspection**

Employer identification number

84 : 1595506

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- a** ☐ Mail solicitations  
**b** ☐ Internet and email solicitations  
**c** ☐ Phone solicitations  
**d** ☐ In-person solicitations  
**e** ☐ Solicitation of non-government grants  
**f** ☐ Solicitation of government grants  
**g** ☐ Special fundraising events

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

**3** List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

[illegible]

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 <b>Entertainment boc</b> (event type)	(b) Event #2 <b>Carnival</b> (event type)	(c) Other events <b>Auction etc.</b> (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts . . . . .	15,485	13,900	23,000	52,385
	2 Less: Charitable contributions . . . . .				
	3 Gross income (line 1 minus line 2) . . . . .				
Direct Expenses	4 Cash prizes . . . . .				
	5 Noncash prizes . . . . .				
	6 Rent/facility costs . . . . .				
	7 Food and beverages . . . . .				
	8 Entertainment . . . . .				
	9 Other direct expenses . . . . .	7,749	4,885	11,150	28,601
	10 Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 0 )
	11 Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				28,601

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . . . .	3,321	0	0	3,321
	2 Cash prizes . . . . .	490	0	0	490
Direct Expenses	3 Noncash prizes . . . . .	365	0	0	365
	4 Rent/facility costs . . . . .				
	5 Other direct expenses . . . . .	151.27			151.27
	6 Volunteer labor . . . . .	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	<input type="checkbox"/> Yes _____% <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( 1,006.27 )
	8 Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				2,314.73

	Yes	No
9 Enter the state(s) in which the organization operates gaming activities: _____		
a Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a ✓	
b If "No," explain: _____		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	10a	✓
b If "Yes," explain: _____		
11 Does the organization operate gaming activities with nonmembers? . . . . .	11	✓
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	12	✓

		Yes	No
<b>13</b>	Indicate the percentage of gaming activity operated in:		
<b>a</b>	The organization's facility . . . . . <b>13a</b> %		
<b>b</b>	An outside facility . . . . . <b>13b</b> %		
<b>14</b>	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ► .....		
	Address ► .....		
<b>15a</b>	Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . <b>15a</b>		✓
<b>b</b>	If "Yes," enter the amount of gaming revenue received by the organization ► \$ ..... and the amount of gaming revenue retained by the third party ► \$ .....		
<b>c</b>	If "Yes," enter name and address of the third party:		
	Name ► .....		
	Address ► .....		
<b>16</b>	Gaming manager information:		
	Name ► .....		
	Gaming manager compensation ► \$ .....		
	Description of services provided ► .....		
	<input type="checkbox"/> Director/officer <input type="checkbox"/> Employee <input type="checkbox"/> Independent contractor		
<b>17</b>	Mandatory distributions:		
<b>a</b>	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . <b>17a</b>		✓
<b>b</b>	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ .....		

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Accrual Basis

# Fox Hollow PTO 2010 Budget 2009/2010 July 2009 through June 2010

Income	Jul '09 - Jun...	Budget	\$ Over Bud...	% of Budget	Jul '09 - Jun...	YTD Budget	\$ Over Bud...	% of Budget	Annual Bud...
Academic Support Pledge Income	1,302 50	6,000 00	4,388 04	173 1%	1,302 50	6,000 00	4,388 04	173 1%	6,000 00
Auction Income	10,388 04	2,500 00	821 00	132 8%	10,388 04	2,500 00	821 00	132 8%	2,500 00
Bingo Income	3,321 00	1,700 00	343 20	120 2%	3,321 00	1,700 00	343 20	120 2%	1,700 00
Box tops Income	2,043 20	1,200 00	-325 00	72 9%	2,043 20	1,200 00	-325 00	72 9%	1,200 00
Brick Income	875 00	13,000 00	900 00	106 9%	875 00	13,000 00	900 00	106 9%	13,000 00
Carnival Income	13,900 00	400 00	-314 95	21 3%	13,900 00	400 00	-314 95	21 3%	400 00
Cartridges for kids Income	85 05	2,340 00	870 00	137 2%	85 05	2,340 00	870 00	137 2%	2,340 00
Directory Income	3,210 00	12,400 00	212 00	101 7%	3,210 00	12,400 00	212 00	101 7%	12,400 00
EduKits Income	12,612 00	17,000 00	-1,155 00	93 2%	12,612 00	17,000 00	-1,155 00	93 2%	17,000 00
Entertainment Books Income	15,845 00	6,000 00	-4,952 25	17 5%	15,845 00	6,000 00	-4,952 25	17 5%	6,000 00
Fox Trotter Income	1,047 75				1,047 75				
General Support Pledge Income	3,691 28				3,691 28				
Library, Specials, Tech Income	752 50				752 50				
Monster Mash Income	497 90				497 90				
Movie Night Income	0 00				0 00				
muffins mom / Donuts Dad	0 00				0 00				
Pledge Drive Income	3,021 00	15,000 00	-11,979 00	20 1%	3,021 00	15,000 00	-11,979 00	20 1%	15,000 00
preschool	0 00				0 00				
Preschool Income	0 00				0 00				
PTO general Income	2,952 12				2,952 12				
Pto Program Pledge Income	2,281 75				2,281 75				
Raffle Income	0 00	4,000 00	-4,000 00	0 0%	0 00	4,000 00	-4,000 00	0 0%	4,000 00
Sprtt Wear Income	4,267 00	6,000 00	-1,733 00	71 1%	4,267 00	6,000 00	-1,733 00	71 1%	6,000 00
Teacher Grants Pledge Income	890 00	6,000 00	-2,010 00	66 5%	890 00	6,000 00	-2,010 00	66 5%	6,000 00
trash bags Income	3,990 00				3,990 00				
Wellness Income	0 00	6,000 00	867 00	114 5%	0 00	6,000 00	867 00	114 5%	6,000 00
Yearbook Income	6,867 00				6,867 00				
<b>Total Income</b>	<b>93,840 09</b>	<b>99,540 00</b>	<b>-5,699 91</b>	<b>94 3%</b>	<b>93,840 09</b>	<b>99,540 00</b>	<b>-5,699 91</b>	<b>94 3%</b>	<b>99,540 00</b>
<b>Expense</b>									
5th grade commencement	0 00	1,200 00	-1,200 00	0 0%	0 00	1,200 00	-1,200 00	0 0%	1,200 00
Adademic Support Pledge Expense	0 00	40,000 00	-40,000 00	0 0%	0 00	40,000 00	-40,000 00	0 0%	40,000 00
Assembly expense	2,378 00	3,900 00	-1,522 00	61 0%	2,378 00	3,900 00	-1,522 00	61 0%	3,900 00
Auction Expense	494 77	1,000 00	-505 23	49 5%	494 77	1,000 00	-505 23	49 5%	1,000 00
Bank Charges	63 70	500 00	-436 30	12 7%	63 70	500 00	-436 30	12 7%	500 00
Bingo Expense	641 27	150 00	491 27	427 5%	641 27	150 00	491 27	427 5%	150 00
Board Expenses (PTO mr)	0 00				0 00				
Box Tops Expense	0 00	200 00	-200 00	0 0%	0 00	200 00	-200 00	0 0%	200 00
Brick Expense	273 00	222 00	51 00	123 0%	273 00	222 00	51 00	123 0%	222 00
Bulletin Board	0 00	50 00	-50 00	0 0%	0 00	50 00	-50 00	0 0%	50 00
Carnival Expense	4,885 00	3,500 00	1,385 00	139 6%	4,885 00	3,500 00	1,385 00	139 6%	3,500 00
Cartridges for kids expense	0 00				0 00				
CCSD	0 00	125 00	-125 00	0 0%	0 00	125 00	-125 00	0 0%	125 00
Copies And Distribution	1,554 66				1,554 66				
Directory Expense	2,811 93	3,000 00	-188 07	93 7%	2,811 93	3,000 00	-188 07	93 7%	3,000 00
Edukit Expense	10,656 56	12,200 00	-1,543 44	87 3%	10,656 56	12,200 00	-1,543 44	87 3%	12,200 00
Entertainment Book Expense	7,749 50	8,100 00	-350 50	95 7%	7,749 50	8,100 00	-350 50	95 7%	8,100 00
Fox Trotters Expense	1,497 97	1,200 00	297 97	124 8%	1,497 97	1,200 00	297 97	124 8%	1,200 00
General Support Pledge Expense	0 00				0 00				
Health and safety	0 00	500 00	-500 00	0 0%	0 00	500 00	-500 00	0 0%	500 00
Libr, Spec, Tech Pledge Expense	0 00	4,000 00	-4,000 00	0 0%	0 00	4,000 00	-4,000 00	0 0%	4,000 00
Marquee Letters/etc.	0 00	75 00	-75 00	0 0%	0 00	75 00	-75 00	0 0%	75 00
Monster Mash expense	522 16	500 00	22 16	104 4%	522 16	500 00	22 16	104 4%	500 00
Movie Night expense	0 00	250 00	-250 00	0 0%	0 00	250 00	-250 00	0 0%	250 00

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Accrual Basis

# Fox Hollow PTO 2010 Budget 2009/2010 July 2009 through June 2010

	Jul '09 - Jun...	Budget	\$ Over Bud...	% of Budget	Jul '09 - Jun...	YTD Budget	\$ Over Bud...	% of Budget	Annual Bud...
muffins mom/ donuts dad	0.00				0.00				
N.E.S.T.	0.00	2,000.00	-2,000.00	0.0%	0.00	2,000.00	-2,000.00	0.0%	2,000.00
Parents Council	0.00	350.00	-350.00	0.0%	0.00	350.00	-350.00	0.0%	350.00
Pledge drive expense	0.00	500.00	-500.00	0.0%	0.00	500.00	-500.00	0.0%	500.00
Preschool expense	0.00				0.00				
PTO general expense	33,189.23				33,189.23				
PTO points	0.00	500.00	-500.00	0.0%	0.00	500.00	-500.00	0.0%	500.00
PTO Program Pledge Expense	0.00				0.00				
Raffle Expense	0.00	500.00	-500.00	0.0%	0.00	500.00	-500.00	0.0%	500.00
Reconciliation Discrepancies	-1.00				-1.00				
Spirit Wear Expense	5,129.90	2,500.00	2,629.90	205.2%	5,129.90	2,500.00	2,629.90	205.2%	2,500.00
Supplies	0.00				0.00				
Teacher Appreciation	665.08	300.00	365.08	221.7%	665.08	300.00	365.08	221.7%	300.00
Teacher Grant Pledge Expense	10,696.07	2,500.00	8,196.07	427.8%	10,696.07	2,500.00	8,196.07	427.8%	2,500.00
Trash Bags Expense	4,039.20	2,000.00	2,039.20	202.0%	4,039.20	2,000.00	2,039.20	202.0%	2,000.00
wellness expense	0.00				0.00				
Year book expense	5,598.26	6,000.00	-401.74	93.3%	5,598.26	6,000.00	-401.74	93.3%	6,000.00
Total Expense	92,845.26	97,822.00	-4,976.74	94.9%	92,845.26	97,822.00	-4,976.74	94.9%	97,822.00
Net Income	994.83	1,718.00	-723.17	57.9%	994.83	1,718.00	-723.17	57.9%	1,718.00