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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

OMB No 1545-0047

Open to Public Inspection

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2009 calendar year, or tax year beginning 2009 JUL and ending JUN 30. Check if applicable C Name of organization D Employer identification number use IRS LITTLETON PUBLIC SCHOOLS Address change label or PARENT TEACHER ORGANIZATION print or Name change type 90-0265283 Doing Business As ]Initial return Number and street (or P.O. box if mail is not delivered to street address) See E Telephone number Specific Termin-ated (303)5776 S CROCKER ST 347-3300 Instruc-Amende return 2,220,543. City or town, state or country, and ZIP + 4 G Gross receipts \$ Applica-tion LITTLETON, CO 80120 STMT 1 H(a) Is this a group return pending F Name and address of principal officer JANE ROMBERGER X Yes [ for affiliates? 80120 5776 S CROCKER ST, LITTLETON, CO H(b) Are all affiliates included? Yes X No Tax-exempt status. X 501(c) ( 3 ) (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ► N/A H(c) Group exemption number ► 3457 Corporation K Form of organization: Trust X Association Other -Year of formation: M State of legal domicile: Part I Summary Revenue 010 Activities & Governishing Briefly describe the organization's mission or most significant activities. PROVIDE PROGRAMS TO ENCOURAGE COMMUNICATION BETWEEN SCHOOLS AND PARENTS. PROVIDE FUNDS FOR Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 15400 Number of voting members of the governing body (Part VI, line 1a) <u>15400</u> Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of employees (Part V, line 2a) 5 4000 Total number of volunteers (estimate if necessary) 6 0. 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 7a 0. Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** RECEIVED 313,946. 314,995. Contributions and grants (Part VIII, line 1h) OSS Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3 1 and 10 VIII 9 2010 7,279. 3,905. 871,082. 844,894. Other revenue (Part VIII, column (A), lines 5, 6d, Bc, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal PartV)/t.golumn (A) line 12 1,192,307. 1,163,794. 741,528. 963,470. Grants and similar amounts paid (Part IX, column (A), lines 1-3 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 27. 16a Professional fundraising fees (Part IX, column (A), line 11e) 27. **b** Total fundraising expenses (Part IX, column (D), line 25) 507,436. 256,123. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 1,248,964. 1,219,620. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <56,657**.** <55,826.> Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year End of Year** 1,176,230. 1,081,198. 20 Total assets (Part X, line 16) Total liabilities (Part X, line 26) 39,622. 416. 21 136,608. 1,080,782. Net\_assets or fund balances Subtract line 21 from line 20 Part II Signature Block 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, Date 11/09/10 Sign Signature of of Here JANE ROMBERGER, PRESIDENT Type or print name and title Check if Preparer's identifying number (see instructions) Preparer's Paid self signature employed > Preparer' MOGG & ASSOCIATES, EIN > yours if self-employed), Use Only 2629 WEST MAIN STREET, STE 160 address, and Phone no.  $\triangleright$  (720) 468-0282 LITTLETON, CO 80120

May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes\_

\_ No

### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION Program Service Accomplishments

90-0265283

Page 2

Pa	rt iii   Statement of Program Service Accomplishments
1	Briefly describe the organization's mission.  PROVIDE PROGRAMS TO ENCOURAGE COMMUNICATION BETWEEN SCHOOLS AND
	PARENTS. PROVIDE FUNDS FOR EDUCATIONAL PROGRAMS BASED ON COMMUNITY
	IDENTIFIED NEEDS.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	If "Yes," describe these changes on Schedule O  Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: )(Expenses \$ 1,217,102. including grants of \$ 963,470.)(Revenue \$ ) PROVIDE EDUCATIONAL MATERIALS AND OPPORTUNITIES BASED ON COMMUNITY IDENTIFIED NEEDS.
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
4c	(Code. ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	, (Legalises V ), (total and y ), (total and y )
4d	Other program services. (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
<u>4e</u>	Total program service expenses ▶\$ 1,217,102.

90-0265283 Form 990 (2009) PARENT TEACHER ORGANIZATION Page 3 Part IV | Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? Х If "Yes," complete Schedule A 1 X Is the organization required to complete Schedule B, Schedule of Contributors? 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I 3 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II 4 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) 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 the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 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 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X Schedule D. Part III 8 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide X credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? X If "Yes," complete Schedule D, Part V 10 11 Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X X as applicable 11 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more 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 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. 12 Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X Schedule D, Parts XI, XII, and XIII. 12 12A Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No X If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, X and program service activities outside the United States? If "Yes," complete Schedule F, Part I 14b 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 X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals X located outside the United States? If "Yes," complete Schedule F, Part III 16 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 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Х

X

18

19

20

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

Page 4

PARENT TEACHER ORGANIZATION Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	23	<u> </u>	X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	١		v
	Schedule K. If "No", go to line 25	24a		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
	any tax-exempt bonds?  Did the exemptation act on an "on behalf of" locuser for bonds outstanding at any time during the year?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
200	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	234		
•	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? 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, 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		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			v
<b>0.4</b>	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			х
32	If "Yes," complete Schedule N, Part I  Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
<b>02</b>	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, 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, Part VI	37		<u>X</u>
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	Х	

Part V Statements Regarding Other IRS Filings and Tax Compliance

1a				
	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			
	U.S. Information Returns. Enter -0- if not applicable	1		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		!!	
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 2a 2			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	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 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 authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and			
	Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited			
	Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			3.5
	any contributions that were not tax deductible?	6a_		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
_	were not tax deductible?	6b		
	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 goods and services			х
_	provided to the payor?	7a		
	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 required	7b		
U	to file Form 8282?	7c	i 1	х
ч	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
-	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C 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 organization, have excess business holdings			
	at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.		l	
а	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			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:		ŀ	
	Gross income from members or shareholders  11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them)  Section 4047(aV4) non-exempt obstituble truste is the executation files Form 900 in law of Form 10412		ł	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
<u>D</u>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		000 (	

#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management					_
					Yes	No
1a	Enter the number of voting members of the governing body	1a	15400			
b	Enter the number of voting members that are independent	1b	15400			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with a	ıny other			
	officer, director, trustee, or key employee?			2	L	X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct	: supervision			
	of officers, directors or trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its organizational documents since the prior Fo		was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's asset	ts?		5_		X
6	Does the organization have members or stockholders?			6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	embers	of the			
	governing body?			7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during	the year			
	by the following.				,,	
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched a	t the	_		7.7
800	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Ri	evenue	Code.)			
10-	Describe averagement on have level aborders because a settle to 0		1	40-	Yes X	No
	Does the organization have local chapters, branches, or affiliates?	-14-	ff:1:-4	10a	_	
D	If "Yes," does the organization have written policies and procedures governing the activities of such	cnapte	rs, amiliates,	10L	х	
11	and branches to ensure their operations are consistent with those of the organization?  Has the organization provided a copy of this Form 990 to all members of its governing body before fi	lına tha	form?	10b 11	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	iiig tile	IOITII			
	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld awa	rica	120		
J	to conflicts?	ila give	1130	12b	x	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes." d	escribe			
_	in Schedule O how this is done	,		12c	х	
13	Does the organization have a written whistleblower policy?			13	Х	
14	Does the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approva	al by inc	lependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	·		ļ	
а	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nent w	th a			
	taxable entity during the year?		1	16a		<u>X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva	luate its	participation			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organic	anızatıo	n's		:	
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►CO			_		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)	(3)s only) available	for		
	public inspection. Indicate how you make these available. Check all that apply.					
	Own website Another's website X Upon request		_			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, c	onflict o	of interest policy, an	d fina	ncıal	
	statements available to the public.					
20	State the name, physical address, and telephone number of the person who possesses the books at THE ORGANIZATION - (303) 347-3300	nd reco	rds of the organizat	ion. 🕨	·	
	5776 S CROCKER ST, LITTLETON, CO 80120					
	STO STOCKER DE L'ESTELLISME CO COTAC					

## Form 990 (2009) PARENT TEACHER ORGANIZATION 90 - 0 2 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.

X Check this box if the organization did (A)	(B)			(6	C)			(D)	(E)	(F)
Name and Title	Average hours	(c		Pos call		app	ıly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee of director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
SEE ATTACHED LIST								0.	0.	C
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Form 990 (2009)

Par	T VII Section A. Officers, Directors, Tru	ustees, Key Ei	mple	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)				C)			(D)	(E)		_	(F)	
	Name and title	Average hours	(6		Pos		n : app	dv)	Reportable compensation	Reportable compensation			stimati mount	
		per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated Employee		from the	from related organization (W-2/1099-MIS	d ns	com fi org an	other npensa rom th ganizat id relat anizati	ation ie tion ted
						_								
		ļ	_	_			_							
						_								
												<u> </u>		
	Total	<u></u>					Ļ		0.		0.			0.
2	Total number of individuals (including but n	ot limited to th	nose	liste	ed al	bove	e) wi	no re	<u> </u>	).000 in reportabl				
	compensation from the organization						-,		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				0
													Yes	No
3	Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s			, ke	y em	plo	yee,	or h	nighest compensated er	nployee on		3		х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150									the organization		4		х
5	Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched	•			rom	any	/ unr	elat	ed organization for serv	ices rendered to		5		х
	tion B. Independent Contractors													
1 —	Complete this table for your five highest co the organization. NONE	mpensated inc	depe	ende	ent c	onti	racto	ors t		\$100,000 of con	npens			
	(A) Name and business	address							(B) Description of s	ervices	С		C) ensatio	n
														_
	· · · · · · · · · · · · · · · · · · ·									_				
	Total number of independent contractors (i	noludina but a	ot l	mıtc	d to	the	ee #	***	Jahaya) who recoved -	ore then				
2	\$100,000 in compensation from the organic	_	iot III	me	ט נט		se IIS )	stea	above, who received if	iore uidii				

LITTLETON PUBLIC SCHOOLS

90-0265283 PARENT TEACHER ORGANIZATION Page 9 Form 990 (2009) Part VIII Statement of Revenue (**D**) Revenue excluded from (A) (B) (C) Total revenue Related or Unrelated tax under sections 512, exempt function business revenue revenue 513, or 514 1 a Federated campaigns 1a 42,854. 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d Government grants (contributions) f All other contributions, gifts, grants, and 272,141 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 314,995 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue ▶ Total. Add lines 2a-2f Investment income (including dividends, interest, and 3,905. 3,905. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross Rents b Less. rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue contributions reported on line 1c). See 1,894,055 Part IV, line 18 1,056,749. b Less direct expenses 837,306 837,306. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a ADVERTISING 7,588. 7,588. 511190 d All other revenue 7,588.

1163794.

0.

Total. Add lines 11a-11d

Total revenue. See instructions.

### LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

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).

	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	952,552.	952,552.		
2	Grants and other assistance to individuals in				
	the U.S See Part IV, line 22	10,918.	10,918.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			_1	
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)	·			
	and section 403(b) employer contributions)				
9	Other employee benefits		-		··· <u> </u>
10	Payroll taxes				
11	Fees for services (non-employees).				
а	Management				
b	Legal	411.		411.	
С	Accounting	1,686.		1,686.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17	27.			27.
f	Investment management fees				
g	Other				
12	Advertising and promotion	10,748.	10,748.		
13	Office expenses		·		·
14	Information technology				
15	Royalties				
16	Occupancy	235.	235.	_	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	18,119.	18,119.		<del></del>
20	Interest	83.	83.		
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.)				
а	OTHER EXPENSES	111,004.	111,004.		
b	SUPPLIES	53,661.	53,661.		
c	EQUIPMENT RENTAL AND MA	32,225.	32,225.		<del></del> -
d	PRINTING AND PUBLICATIO	27,557.	27,557.		
e	BANK CHARGES	394.		394.	
f	All other expenses				<del></del>
25	Total functional expenses. Add lines 1 through 24f	1,219,620.	1,217,102.	2,491.	27.
26	Joint costs. Check here I I I 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				
	2.02.04.10			<del></del>	Form <b>990</b> (2000)

Form 990 (2009)

	rt X	Balance Sheet	ORGANIZATION	<del></del>		0205203 Page 11
		<u>-</u>		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		392,493.	1	372,965.
	2	Savings and temporary cash investments		736,392.	2	686,563.
i	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		255.	4	
	5	Receivables from current and former officers, di	rectors, trustees, kev			
	l	employees, and highest compensated employee				
	•	of Schedule L	·		5	
	6	Receivables from other disqualified persons (as	defined under section			
		4958(f)(1)) and persons described in section 495				
		Part II of Schedule L			6	
S.	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use		47,090.	8	21,670.
As	9	Prepaid expenses and deferred charges		- · · · · · · · · · · · · · · · · · · ·	9	
	İ	Land, buildings, and equipment cost or other	1 1			
		basis. Complete Part VI of Schedule D	10a			
	h	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	100		11	
	12	Investments - other securities. See Part IV, line 1	11		12	
	13	Investments - program-related. See Part IV, line			13	
	14	Intangible assets	··		14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal	al line 34)	1,176,230.	16	1,081,198.
	17	Accounts payable and accrued expenses	ar in 10 0-17	39,622.	17	416.
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
<sub>s</sub>	21	Escrow or custodial account liability. Complete F	Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, director				
<u> </u>	_	highest compensated employees, and disqualifi	* ' *			
اڌ		of Schedule L	od pordona. Gompioto i dit ii		22	
	23	Secured mortgages and notes payable to unrela	ated third parties		23	
	24	Unsecured notes and loans payable to unrelated	•		24	
	25	Other liabilities. Complete Part X of Schedule D	s time parties		25	
	26	Total liabilities. Add lines 17 through 25		39,622.	26	416.
$\neg$		Organizations that follow SFAS 117, check he	ere X and complete			
တ္က		lines 27 through 29, and lines 33 and 34.		,		
Net Assets or Fund Balances	27	Unrestricted net assets		1,136,608.	27	1,080,782.
<u>a</u>	28	Temporarily restricted net assets			28	
B B		Permanently restricted net assets	1		29	
Š		Organizations that do not follow SFAS 117, cl	neck here 🕨 🔲 and			
<u> </u>		complete lines 30 through 34.			ŀ	
ţ	30	Capital stock or trust principal, or current funds			30	
SSe		Paid-in or capital surplus, or land, building, or eq	upment fund		31	· · · · · · · · · · · · · · · · · · ·
ţ.		Retained earnings, endowment, accumulated in	•		32	
•		Total net assets or fund balances	come, or other facility	1,136,608.	33	1,080,782.
Z	33					

Form **990** (2009)

#### LITTLETON PUBLIC SCHOOLS Form 990 (2009) PARENT TEACHER Part XI | Financial Statements and Reporting PARENT TEACHER ORGANIZATION

90-0265283 Page 12

Га	Tt All 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		Х
C	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			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	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		X
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		
		Form	990 (2	2009)

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

LITTLETON PUBLIC SCHOOLS

PARENT TEACHER ORGANIZATION

Employer identification number 90-0265283

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) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 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 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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.) An organization that normally receives (1) more than 33 1/3% 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 1/3% 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.) 10 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 ∟ Type I **b** Type II c \_\_\_\_ Type III - Functionally integrated 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 II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col in col. (i) listed in your organization in col. organization support (i) organized in the U.S.? (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes No Yes No

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

Total

Schedule A (Form 990 or 990-EZ) 2009 Page 2 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 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 Section B. Total Support Calendar 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 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. 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 stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. 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 stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2008. 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 stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 PARENT TEACHER ORGANIZATION 90-0265283 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.)

Sec	ction A. Public Support						
Cald	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.")	229,094.	271,547.	239,059.	313,946.	314,995.	1,368,641.
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	2,634,045.	2,570,898.	2,620,075.	2,154,674.	1,894,055.	11,873,747.
2	• • • • •	2,034,043.	2,370,030.	2,020,073.	2,134,074.	1,051,055.	11,075,747.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organ-				_		
•	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
J	furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2,863,139.	2,842,445.	2,859,134.	2,468,620.	2,209,050.	13,242,388.
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						0.
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						0.
_	amount on line 13 for the year						0.
	Add lines 7a and 7b				_		13,242,388.
<del>&amp;</del>	Public support (Subtract line 7c from line 6)						13,242,300.
		(a) 0005	(h) 000c	(-) 0007	(4) 0000	(0) 0000	/6\ T-4-I
	endar year (or fiscal year beginning in)	(a) 2005 2,863,139.	(b) 2006 2,842,445.	(c) 2007 2,859,134.	(d) 2008 2,468,620.	(e) 2009 2,209,050.	(f) Total 13,242,388.
_	Amounts from line 6 Gross income from interest,	2,003,133.	2,042,443.	2,035,134.	2,400,020.	2,203,030.	13,242,300.
	dividends, payments received on securities loans, rents, royalties and income from similar sources	12,747.	18,882.	17,065.	7,279.	3,905.	59,878.
h	Unrelated business taxable income	,			. ,	0,000	
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b	12,747.	18,882.	17,065.	7,279.	3,905.	59,878.
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	22,72,7	20,002	27,70001	.,2.51	3,3031	3370.00
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)	2,875,886.	2,861,327.	2,876,199.	2,475,899.	2,212,955.	13,302,266.
14	First five years. If the Form 990 is for	the organization's	first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
	check this box and stop here	•			•		ightharpoonup
Sec	tion C. Computation of Publ	ic Support Per	rcentage		•	•	
15	Public support percentage for 2009 (I	ine 8, column (f) di	vided by line 13, c	olumn (f))		15	99.55 %
	Public support percentage from 2008	• • • • • • • • • • • • • • • • • • • •	-	\ <i>''</i>		16	99.54 %
	tion D. Computation of Inves						
	Investment income percentage for 20		<del>-</del>	ie 13. column (fl)		17	.45 %
	Investment income percentage from 2		· · · · · · · · · · · · · · · · · · ·	,	i	18	.46 %
	33 1/3% support tests - 2009. If the			on line 14, and line	ا 15 s more than 3 -		<u>_</u>
	more than 33 1/3%, check this box as	-				•	<b>→ X</b>
h	33 1/3% support tests - 2008. If the	=		• •	• •		-
	line 18 is not more than 33 1/3%, che	-				•	<b>.</b>
20	Private foundation. If the organization			•		•	
<del></del>	ato roundations is the organizatio	aid fiot dileon a l	207 OI III 0 17, 136	a, or roo, oricon th	DON GITTE SEE ITS		

#### **SCHEDULE G**

(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities** 

OMB No 1545-0047

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.

**Open To Public** Inspection

LITTLETON PUBLIC SCHOOLS **Employer identification number** Name of the organization 90-0265283 PARENT TEACHER ORGANIZATION Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations а Solicitation of government grants b Internet and email solicitations Phone solicitations Special fundraising events C In-person solicitations d 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or Yes \_ No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 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. (v) Amount paid (iii) Did (vi) Amount paid (i) Name of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col (i) Yes No Total 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

#### LITTLETON PUBLIC SCHOOLS

PARENT TEACHER ORGANIZATION 90-0265283 Page 2 Schedule G (Form 990 or 990-EZ) 2009 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. (c) Other events (a) Event #1 (b) Event #2 (d) Total events LAURA WILDERLOIS LENSKI (add col. (a) through ELEMENTARY ELEMENTARY F 29 col. (c)) (total number) (event type) (event type) 1,476,497. 220,345 197,212. 1,894,054. Gross receipts 2 Less: Charitable contributions 197,212. 1,476,497. 1,894,054. 220,345 Gross income (line 1 minus line 2) Cash prizes Noncash prizes Expenses Rent/facility costs Direct Food and beverages 8 Entertainment 89,231 124,115 843,403 1,056,749. Other direct expenses 1,056,749 10 Direct expense summary. Add lines 4 through 9 in column (d) 837,305. 11 Net income summary. Combine line 3, column (d), and line 10 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 (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) 11,589 14,597 26,186. Gross revenue 2,301 538 2,839. 2 Cash prizes Direct Expenses 2,621. 143. 2,478. 3 Noncash prizes Rent/facility costs 437 135 572. Other direct expenses X Yes 100.00 % 100.00 % X Yes Yes % 6 Volunteer labor No No 6,0324 7 Direct expense summary. Add lines 2 through 5 in column (d) 20,154. Net gaming income summary. Combine line 1, column (d), and line 7 Yes No 9 Enter the state(s) in which the organization operates gaming activities. CO X a is the organization licensed to operate gaming activities in each of these states? 9a b if "No," explain: X 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b If "Yes," explain.

11

X

X

administer charitable gaming?

Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to

#### LITTLETON PUBLIC SCHOOLS orm 990 or 990-EZ) 2009 PARENT TEACHER ORGANIZATION

ch	edule G (Form 990 or 990-EZ) 2009 PARENT TEACHER ORGANIZATION 90-026	<u> 528</u>	3 Pa	age <b>3</b> _
			Yes	No
3	Indicate the percentage of gaming activity operated in:			
	The organization's facility 13a %			
	An outside facility 13b 100.00 %			
4	Enter the name and address of the person who prepares the organization's gaming/special events books and records.			
	Name ► CARRIE WARREN-GULLY			
	Address ► 5776 S CROCKER ST - LITTLETON, CO 80120			
5а	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		<u>x</u>
b	If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$ .			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address >			
6	Gaming manager information:			
	Name ▶ SEE ATTACHED LIST			
	Gaming manager compensation ▶ \$			
	Description of services provided MAINTAIN LICENSE, DESIGN AND UTILIZE PROCEDURES REQUIRED BY COLORADO, MAINTAIN BOOKS AND RECORDS,			
	AND FILE APPLICABLE FORMS WITH COLORADO.			
	■ Director/officer			
	Mandatory distributions.			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a	Х	,
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		1	
	organization's own exempt activities during the tax year ▶ \$ 20,154.			

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZAT	PUBLIC S ACHER ORG	C SCHOOLS ORGANIZATION					Employer identification number 90-0265283
Part I General Information on Grants and Assistance	nd Assistance						
1 Does the organization maintain records to substantiate the amount of	to substantiate the		s or assistance, the	grantees' eligibilit	y for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	
	stance?			ı			X Yes
ö۲	ocedures for moni	toring the use of grant	t funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organizati	Governments an	d Organizations in th	e United States. (	complete if the orga	anization answered "Y	ions in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	\$5,000. Check this	s box if no one recipie	nt received more th	nan \$5,000. Use Pa	art IV and Schedule I-1	(Form 990) if addition	al space is needed
1 (a) Name and address of organization or government	( <b>b</b> ) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							PROVIDE EDUCATIONAL
LITTLETON PUBLIC SCHOOLS							MATERIALS AND
5776 S CROCKER ST							OPPORTUNITIES BASED ON
LITTLETON, CO 80120		3	952,551.	0.			COMMUNITY IDENTIFIED
						:	
	nd government or	ganizations					1
-1	S						<b>A</b>
LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  SEE PART IV FOR COLUMN (H) DESCRIPTI	ction Act Notice, IV FOR CO	see the Instructions LUMN (H) DE	ions for Form 990. DESCRIPTIONS	လွ			Schedule I (Form 990) 2009

90-0265283

Page 2

Schedule I (Form 990) 2009

PARENT TEACHER ORGANIZATION

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

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1 (Form 990) if additional space is needed.
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Form 99
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Use Part IV and Schedule I-1
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(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
PROVIDE EDUCATIONAL MATERIALS AND OPPORTUNITIES BASED ON COMM NITY IDENTIFIED NEEDS.		10,918.	•0		
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	rde the information	n required in Part I, I	line 2, and any other	additional information.	
SCHEDULE I, PART I, LINE 2: EACH S	EACH SCHOOL PA	RENT TEACH	ER ORGANIZ	PARENT TEACHER ORGANIZATION WORKS	
CLOSELY WITH ITS SCHOOL THROUGH PA	PARENT AND	TEACHER	INTERACTION.	. THE NEEDS	
OF THE SCHOOL ARE DETERMINED BY THE	HE PARENTS	AND	TEACHERS. THE	APPROVED	
FUNDING IS VOTED ON BY THE ORGANIZATION.		THE PARENTS	S AND TEACHERS	HERS ARE	
ACTIVE PARTICIPANTS IN THE USE OF	THE FUNDS.	S.			

COLUMN (H): PART II, LINE 1, NAME OF ORGANIZATION OR GOVERNMENT: LITTLETON PUBLIC SCHOOLS

(H) PURPOSE OF GRANT OR ASSISTANCE: PROVIDE EDUCATIONAL MATERIALS AND

# 90-026<u>5283 Page 2</u> PARENT TEACHER ORGANIZATION Schedulè I (Form 990) 2009 Part IV | Supplemental Information OPPORTUNITIES BASED ON COMMUNITY IDENTIFIED NEEDS.

LITTLETON PUBLIC SCHOOLS

#### SCHEDULE M (Form 990)

**Noncash Contributions** 

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

LITTLETON PUBLIC SCHOOLS
PARENT TEACHER ORGANIZATION

Employer identification number 90-0265283

Types of Property (d) (a) (b) (c) Number of Revenues reported on Method of determining Check if applicable contributions Form 990, Part VIII, line 1g revenues 1 Art - Works of art 2 Art · Historical treasures 3 Art - Fractional interests Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 8 Intellectual property 9 Securities - Publicly traded 10 Securities - Closely held stock 11 Securities · Partnership, LLC, or trust interests Securities - Miscellaneous 12 Qualified conservation contribution -13 Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory Drugs and medical supplies 20 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts ( SILENT AUCTIO) X DONOR PROVIDED VALUE 25 Other 26 Other 27 Other -Other 28 Number of Forms 8283 received by the organization during the tax year for contributions 0 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgment Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for X 30a the entire holding period? b If "Yes," describe the arrangement in Part II. X Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash X contributions? 32a b If "Yes," describe in Part II If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, 33 describe in Part II.

PARENT TEACHER ORGANIZATION 90-0265283 Schedule M (Form 990) 2009 Page 2 Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information. SCHEDULE M, PART I, COLUMN (B): ORGANIZATIONS DID NOT TRACK THE TOTAL NUMBER OF CONTRIBUTORS TO THEIR SILENT AUCTIONS. SCHEDULE M, LINE 33: ORGANIZATIONS DID NOT REPORT THE VALUE OF THEIR NON-CASH CONTRIBUTIONS AS GROSS RECEIPTS. ORGANIZATIONS ONLY REPORTED THE CASH RECEIPTS FROM THE EVENTS.

LITTLETON PUBLIC SCHOOLS

#### **SCHEDULE O**

(Form 990)

932211 02-03-10

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.

2009
Open to Public Inspection

Name of the organization

LITTLETON PUBLIC SCHOOLS PARENT TEACHER ORGANIZATION

Employer identification number 90-0265283

Schedule O (Form 990) 2009

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
EDUCATIONAL PROGRAMS BASED ON COMMUNITY IDENTIFIED NEEDS.
FORM 990, PART VI, SECTION A, LINE 1: EVERY PARENT OF EVERY STUDENT
WITHIN THE SCHOOL DISTRICT HAS A VOTING RIGHT. DUE TO THE NUMBER OF
STUDENTS, THE ORGANIZATION IS UNABLE TO DETERMINE AN ACCURATE NUMBER OF
INDEPENDENT VOTING MEMBERS SO THE ORGANIZATION IS USING THE SAME NUMBER AS
THE APPROXIMATE NUMBER OF MEMBERS WITH VOTING RIGHTS.
FORM 990, PART VI, SECTION A, LINE 6: EACH PARENT OF EACH STUDENT IS A
VOTING MEMBER OF THE BOARD.
FORM 990, PART VI, SECTION A, LINE 7A: THE OFFICERS OF THE BOARD ARE
ELECTED BY THE PARENTS OF THE STUDENTS.
FORM 990, PART VI, SECTION A, LINE 7B: THE PARENTS OF THE STUDENTS VOTE ON
ACTIONS TAKEN BY THE BOARD.
FORM 990, PART VI, SECTION B, LINE 11: GOVERNING BODY CONSISTS OF
PRESIDENT, VICE-PRESIDENT, AND TREASURER. THE TREASURER WORKS WITH THE TAX
PREPARER TO COMPLETE FORM 990 AND THE APPLICABLE SCHEDULES. AFTER
COMPLETION, THE FORM 990 IS PRESENTED TO THE PRESIDENT FOR THEIR REVIEW AND
SIGNATURE WITHOUT A FORMAL MEETING.
FORM 990, PART VI, SECTION B, LINE 12C: PTO PRESIDENT REVIEWS AND SIGNS

CONFLICT OF INTEREST POLICY AND ENSURES TREASURER AND ANY COMMITTEES WITH

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

#### **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.

LITTLETON PUBLIC SCHOOLS

OMB No 1545-0047 Open to Public Inspection

Name of the organization **Employer identification number** PARENT TEACHER ORGANIZATION 90-0265283 AUTHORITY TO SPEND MONEY ARE AWARE OF AND FOLLOW THE POLICY. FORM 990, PART VI, SECTION C, LINE 19: COPIES OF THE BOARD MINUTES ARE MAINTAINED AT EACH SCHOOL OFFICE AND ARE AVAILABLE UPON REQUEST. DOCUMENTS ARE MAINTAINED AT THE SCHOOL DISTRICT OFFICE AND ARE AVAILABLE UPON REQUEST.

# LITTLETON PUBLIC SCHOOLS PTO 80-0265283

# OFFICERS

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0.00	ADDRESS	c/o Hentage High School	c/o Powell Middle School	c/o Newton Middle School	c/o Goddard Middle School	c/o Euclid Middle School	c/o Littleton Academy School Association	c/o Littleton Academy School Association	c/o Highland Elementary	c/o Highland Elementary	c/o Franklin Elementary	c/o East Elementary	c/o Laura Ingalls Wilder Elementary	c/o Mark Twain Elementary	c/o Mark Twain Elementary	c/o Carl Sandburg Elementary	c/o Carl Sandburg Elementary	c/o Damon Runyon Elementary	c/o Damon Runyon Elementary	c/o Peabody Elementary	do Lois Lenski Elementary	c/o Lois Lenski Elementary	c/o Mark Hopkins Elementary	c/o The Village Preschool	c/o Field Elementary	c/o Ralph Moody Elementary	c/o Centennial Elementary	c/o Arapahoe High School	c/o Littleton High School
	NAME - TITLE	Kelly Perez = President	Sherr Brasher = Co-President Deb Cordero = Co-President	Jody Rein = President	Julie Teneyck= President	Kim Drennan = President	Kathy Reuter = President	George Kallas = Cubmaster	Carolyn Winterbottom = Co-President, Bill Brown = Co-President	Kelly Willard = Cubmaster	Jeralyn Baker = Co-President, Amy Eckhout = Co-President	Kate Houlette = President	Emily Fuchs = Co-President, Stephanie Sullivan = Co-President	Heather Herman = Co-President, Laura Bruno = Co-President	Matt Elledge = Cubmaster	Jennifer Muller = President	Andy Marquez = Cubmaster	Gretchen Trail = President	Kurt Fulwider = Cubmaster	Letrcia Higdon = Co-President Elizabeth Baggerly = Co-President	Laurence Mapp - Cubmaster	Katherine Hahn = Co-President, Kelly Ryan=Co-President	Teresa Montejano = President	Tracy Cass = Co-President, Jamie Maestas = Co-President	Rana VanLeewen=Co-President, Ruthanne Zueger=Co-President	Kristen Smith = President	Chelsea Wanderlich = President	Kelly Perez = President	Jean Sederberg = President
	SCHOOL NAME	Hentage High School	Powell Middle School	Newton Middle School	Goddard Middle School	Euclid Middle School	Littleton Academy	Littleton Academy Cub Pack 49	Highland Elementary	Highland Cub Scout Pack #175	Franklın Elementary	East Elementary	Laura Engalls Wilder Elementary	Mark Twain Elementary	Twain Cub Scout Pack 632	Carl Sandburg Elementary	Sandburg Cub Scout Pack 559	Damon Runyon Elementary	Runyon Cub Scout Pack #462	Peabody Elementary	Lenski Cub Scout Pack #664	Lois Lenski Elementary	Mark Hopkins Elementary	The Village Preschool	Field Elementary	Ralph Moody Elementary	Centennial Elementary	Arapahoe High School	Littleton High School

Littleton Public Schools PTOs List of Gaming Managers June 30, 2010

#### 90-0265283

Carrie Larson Carl Sandburg Elementary
Ted Kramer Damon Runyon Elementary

Bob Belin Highland Elementary

Pam Paulsen Laura Ingalls Wilder Elementary

Julie Armijo Littleton Academy
Marti Pratt Lois Lenski Elementary

FORM 990 LINE H(B) - I ORGANIZATIONS INC	LIST OF AFFILIATED CLUDED IN GROUP RETURN	STATEMENT 1
NAME OF ORGANIZATION	ORGANIZATION'S ADDRESS	EMPLOYER ID
HERITAGE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501709
POWELL MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501712
GODDARD MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501717
EUCLID MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501718
LITTLETON ACADEMY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1354609
HIGHLAND ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501735
FRANKLIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501733
EAST ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501731
NEWTON MIDDLE SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501714
LAURA INGALLS WILDER ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501720
MARK TWAIN ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501722
CARL SANDBURG ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501725
DAMON RUNYON ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501726
PEABODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501727
LOIS LENSKI ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501737
MARK HOPKINS ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501736

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#### LITTLETON PUBLIC SCHOOLS PARENT TEACHER

THE VILLAGE PRESCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501741
FIELD ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501732
RALPH MOODY ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501728
CENTENNIAL ELEMENTARY PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501729
ARAPAHOE HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501711
LITTLETON HIGH SCHOOL PARENT TEACHER ORGANIZATION	5776 S CROCKER ST - LITTLETON, CO 80120	84-1501708