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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 01 , 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 Instructions.

C Name of organization
H.D. THOREAU ELEMENTARY PTA

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
2003 65TH AVENUE WEST

City or town, state or country, and ZIP + 4
TACOMA, WA 98466-6215

D Employer identification number
91-1093152

E Telephone number
425-454-7188

F Group Exemption Number ▶ N/A

• ***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) ▶

H Check ▶ ☑ if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ www.lwsd.org/school/thoreau

J Tax-exempt status (check only one) — ☑ 501(c) (3) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

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 ▶ $ 85782

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received			1 34749
	2	Program service revenue including government fees and contracts			2 27089
	3	Membership dues and assessments			3 1683
	4	Investment income			4 117
	5a	Gross amount from sale of assets other than inventory	5a	0	
	b	Less: cost or other basis and sales expenses	5b	0	
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)			5c 0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from **gaming**, check here ▶ ☐			
	a	Gross revenue (not including $ _____ of contributions reported on line 1)	6a	22144	
	b	Less: direct expenses other than fundraising expenses	6b	13212	
	c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)			6c 8932
	7a	Gross sales of inventory, less returns and allowances	7a	0	
	b	Less: cost of goods sold	7b	0	
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)			7c 0
	8	Other revenue (describe ▶ _____)			8 0
	9	**Total revenue.** Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 ▶			9 72570
Expenses	10	Grants and similar amounts paid (attach schedule)			10 1373
	11	Benefits paid to or for members			11 0
	12	Salaries, other compensation, and employee benefits			12 0
	13	Professional fees and other payments to independent contractors			13 285
	14	Occupancy, rent, utilities, and maintenance			14 0
	15	Printing, publications, postage, and shipping			15 339
	16	Other expenses (describe ▶ SEE ATTACHED SPREADSHEET)			16 77689
	17	**Total expenses.** Add lines 10 through 16 ▶			17 79686
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)			18 -7116
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)			19 24328
	20	Other changes in net assets or fund balances (attach explanation)			20 0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ▶			21 17212

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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
22	Cash, savings, and investments	24328	22	17212
23	Land and buildings	0	23	0
24	Other assets (describe ▶ _____)	0	24	0
25	**Total assets**	24328	25	17212
26	**Total liabilities** (describe ▶ _____)	0	26	0
27	**Net assets or fund balances** (line 27 of column (B) must agree with line 21)	24328	27	17212

20

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **To support the ed.,hlth & welfare of all children & youth**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)	
28	**Assemblies, Curriculum, Support, Field Trips, Em Prep, 6th Grade Programs, Safety Patrol, Math & Reading Programs, Playground Equipment, Classroom Funds, Library & Music, and Art Docent** (Grants $) If this amount includes foreign grants, check here ▶ ☐	28a	40223
29	**Community Support** (Grants $) If this amount includes foreign grants, check here ▶ ☐	29a	0
30	**Recognizing Community, Staff and Parents of the Thoreau Community who have helped Students** (Grants $) If this amount includes foreign grants, check here ▶ ☐	30a	2972
31	Other program services (attach schedule) (Grants $) If this amount includes foreign grants, check here ▶ ☐	31a	0
32	**Total program service expenses** (add lines 28a through 31a) ▶	32	43195

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Jodi Pund **14239 79th Avenue NE, Bothell, WA 98011**	**PTA Co-President**	0	0	0
Shannon Camilleri **14221 95th Avenue NE, Bothell, WA 98011**	**PTA Co-President**	0	0	0
Juliana Canales **7804 NE 142nd Pl, Bothell, WA 98011**	**PTA VP Specific/Safety**	0	0	0
Lynn Kacatin **14151 91st Court NE, Bothell, WA 98011**	**PTA VP Enrichment**	0	0	0
Natalie Young **13903 94th Avenue NE, Kirkland, WA 98034**	**PTA VP Ways & Means**	0	0	0
Stacy McJunkin **8418 NE 139th Street, Kirkland, WA 98034**	**PTA Secretary**	0	0	0
Terry Keith **12668 NE 10th PL #D7, Bellevue, WA 98005**	**PTA Treasurer**	0	0	0

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

			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34		✓
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but **not** reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.			
a	Did the organization have unrelated business gross income of $1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		✓
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	35b		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0	37b		✓
b	Did the organization file **Form 1120-POL** for this year?			
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee **or** were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b N/A			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9 39a N/A			
b	Gross receipts, included on line 9, for public use of club facilities 39b N/A			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		✓
c	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 ▶ 0			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0			
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e		✓

41 List the states with which a copy of this return is filed. ▶ N/A

42a The organization's books are in care of ▶ Terry Keith Telephone no. ▶ 425-454-7188

Located at ▶ 12668 NE 10th PL #D7, Bellevue WA ZIP + 4 ▶ 98005-2516

			Yes	No
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)?	42b		✓
	If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.**			
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
	If "Yes," enter the name of the foreign country: ▶			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041**—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			

			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45		✓

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.

			Yes	No
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		✓
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47		✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		✓
b	If "Yes," was the related organization a section 527 organization?	49b		✓

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
NONE				

f Total number of other employees paid over $100,000 . . . . ▶

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
NONE		

d Total number of other independent contractors each receiving over $100,000 . . ▶

Sign Here

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.

Theresa E. (Terry) Keith — Signature of officer

10/16/2010 — Date

Theresa E. (Terry) Keith — Type or print name and title

Paid Preparer's Use Only

Preparer's signature	Date	Check if self-employed ▶ ☐	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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
H.D. THOREAU ELEMENTARY PTA	91 : 1093152

Part I 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: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ 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.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☑ An organization that normally receives: (1) more than 33⅓ % 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 33⅓ % 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).**

11 ☐ 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.

a ☐ Type I **b** ☐ Type II **c** ☐ Type III–Functionally integrated **d** ☐ Type III–Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, 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? 11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

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
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						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

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 Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . 15 %

16a **33⅓ % support test—2009.** If the organization did not check the box on line 13, and line 14 is 33⅓ % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33⅓ % support test—2008.** If the organization did not check a box on line 13 or 16a, and line 15 is 33⅓ % 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 ▶ ☐

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
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1048	1090	1180	35349	36432	75099
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	57709	56729	83485	26766	49233	273922
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6 **Total.** Add lines 1 through 5	58757	57819	84665	62115	85665	349021
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	198	278	300	350	1943	3069
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	0	0	0	0	0	0
c Add lines 7a and 7b	198	278	300	350	1943	3069
8 **Public support** (Subtract line 7c from line 6.)						345952

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	58757	57819	84665	62115	85665	349021
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	50	75	100	198	117	540
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
c Add lines 10a and 10b	50	75	100	198	117	540
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0		0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0		0	0
13 **Total support.** (Add lines 9, 10c, 11, and 12.)	58807	57894	84765	62313	85782	349561

14 **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

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	99 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	99 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c, column (f) divided by line 13, column (f))	17	1 %
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	1 %

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 ▶ ☐

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.

PART I AND PART II			
Contributions, Gifts, Grants			
Line 1			
	Revenue	**Expenses**	**Net**
Ribbet Run	29053		29053
Vol. Matching Funds	2237		2237
Box Tops	977		977
Albertsons	331		331
Target CC Program	72		72
Safeway E-Script	503		503
Goodsearch	106		106
PACE	1470		1470
TOTAL LINE 1	**34749**		
Program Serv Rev	**Revenue**	**Expenses**	**Net**
Line 2			
Art Classes	1663		
Book Rodeo	95		
Chess Club	985		
Drama	3907		
Honor Choir	2745		
Jump Rope	704		
Nature Connections	245		
Drum Club	200		
Lego	2044		
Karate	5961		
Spanish	900		
Cheer	762		
Yoga	3407		
Art Docent	194		
Assemblies	225		
Aaron Brown Scholarship	45		
NSF Reimbursements	119		
Memory Books	1530		
Staff Development	5		
Music	287		
Staff Appreciation	430		
Prev Yr Carry Forward	636		
TOTAL LINE 2	**27089**		
Membership Dues	1683		1683
Line 3			0
Comm/Student Programs Events	**Revenue**	**Expenses**	**Net**
Line 6a / 6b			
Fall Dance	51	2305	-2254
MITI Holiday Fair	1121	1470	-349
Valentine B'fast	1153	570	583
Bingo Night	1494	1070	424
Spring Carnival	3482	2692	790
Silent Auction	11861	2240	9621
Spirit Shirts	2982	2865	117
TOTAL LINE 6a & 6b	**22144**	**13212**	

Other Expenses	**Revenue**	**Expenses**	**Net**
Line 16			
Ribbet Run		4065	-4065
Art Classes		3166	-3166
Book Rodeo		44	-44
Chess Club		1186	-1186
Drama		5334	-5334
Honor Choir		3227	-3227
Jump Rope		872	-872
Nature Connections		380	-380
Drum Club		150	-150
Lego		2570	-2570
Karate		1560	-1560
Spanish		1404	-1404
Cheer		887	-887
Yoga		3911	-3911
OutdoorEducation (6th Grade Camp)		2912	-2912
Art Docent		395	-395
Assemblies		3187	-3187
Book Adventure		169	-169
Book Fair		210	-210
Reflections		77	-77
Running Club		147	-147
Leadership Council		2012	-2012
Safety Patrol		748	-748
Support/Scholarships		24	-24
Box Tops		16	-16
Bank Chgs		432	-432
Conferences/Workshops		45	-45
PTA Admin		922	-922
PTA Scholarships		200	-200
PTA Spec Discresionary		1247	-1247
Legislative Support		218	-218
Awards		303	-303
6th Grade Yearbook		110	-110
Frog Day		63	-63
Emergency Prep		258	-258
Memory Books		442	-442
Classroom Funds		2239	-2239
Teacher Requests		3581	-3581
Field Trips		4140	-4140
Staff Development		1941	-1941
Library Guild		1348	-1348
Music		322	-322
Special Education		633	-633
Kindergarten		2185	-2185
Recess Toys/Playground		517	-517
Planners		1309	-1309
New Teacher Support		375	-375
6th Grade Ribbet Run Rebate		438	-438
PE		400	-400
Ice Cream Social		800	-800
Staff Appreciation		1166	-1166
Batteries		335	-335
YE Playground Equipment		11203	-11203

Benches		1545	-1545
Capital Expense		319	-319
TOTAL LINE 16		**77689**	
PART III			
Curriculum Support	**Revenue**	**Expenses**	**Net**
Line 28a			
Book Rodeo		44	-44
Outdoor Education (6th Grade Camp)		2912	-2912
Art Docent		201	-201
Asemblies		2962	-2962
Book Adventure		169	-169
Book Fair		210	-210
Safety Patrol		748	-748
Support/Scholarships		24	-24
Awards		303	-303
6th Grade Yearbook		110	-110
Frog Day		63	-63
Emergency Prep		258	-258
Classroom Funds		2239	-2239
Teacher Requests		3581	-3581
Field Trips		4140	-4140
Staff Development		1936	-1936
Library Guild		1348	-1348
Music		35	-35
Special Education		633	-633
Kindergarten		2185	-2185
Recess toys/Playground		517	-517
Planners		1309	-1309
New Teacher Support		375	-375
6th Grade Ribbet Run Rebate		438	-438
PE		400	-400
Batteries		335	-335
YE Plaground		11203	-11203
Benches		1545	-1545
TOTAL LINE 28a		**40223**	
Community Support	**Revenue**	**Expenses**	**Net**
Line 29a			
TOTAL LINE 29a		**0**	
Student Programs	**Revenue**	**Expenses**	**Net**
Line 30a			
Reflections		77	-77
Running Club		147	-147
Leadership Program		2012	-2012
Staff Appreciation		736	-736
TOTAL LINE 30a		**2972**	

ANNUAL REPORT

FISCAL YEAR:	07/01/09 - 06/30/10	**DATE PREPARED:**	7/11/2010
LOCAL PTA NAME:	H.D. Thoreau Elementary		
CITY:	Kirkland, WA		
IRS NUMBER:	91-1093152		
DISTRICT and COUNCIL:	2.8.60		

ACTUAL RECEIPTS	
Membership Dues	
(171 members at $11.00 single/$18.00 couple)	$1,683.00
FUNDRAISING (total gross receipts)	$83,460.70
(or any means used for making money)	
SPONSORSHIPS	$0.00
BALANCE brought forward from previous year	$636.01
TOTAL RECEIPTS	**$85,779.71**

ACTUAL EXPENDITURES	
Membership	$1,373.00
Fundraising Projects	$4,065.08
Family Events	$10,356.15
Student/Enrichment Programs	$37,286.42
Misc Income/Expenses	$115.82
Admin (PTA Specific)	$4,090.61
Committees	$873.03
Curriculum Support	$19,465.43
Special Events	$1,965.74
Special Expenses	$13,401.57
TOTAL EXPENDITURES	**$92,992.85**
Amount Remaining for Next Year	-$7,213.14

Receipts Not Belonging to Local PTA	
State and National PTA Dues (171 members at $7.00)	$1,197.00
Annual Fee	$5.00
Council Assessment (171 members at $1.00)	$171.00
TOTAL	**$1,373.00**

THOREAU PTA			
MONTHLY TREASURER'S REPORT	07/31/10		
BALANCE ON HAND AS OF June 30, 2010		$31,471.92	

INCOME	Actual Monthly	Actual YTD	Budget	Variance
1) Membership Dues	0.00	1683.00	1200.00	483.00
2) Investment (CD @ Bank on $10,546.38)	0.00	117.02	150.00	-32.98
3) Matching Funds	0.00	1155.12	1000.00	155.12
4) Fundraising Projects:	0.00	636.01	3100.00	-2463.99
Ribbet Run	0.00	29053.00	18000.00	11053.00
5) Family Events:				
Fall Dance	0.00	50.50	50.00	0.50
MITI Fair	0.00	1121.00	1000.00	121.00
Valentine B'fast	0.00	1152.75	1300.00	-147.25
Bingo Night	0.00	1493.50	1600.00	-106.50
Spring Carnival	0.00	3736.99	3500.00	236.99
Silent Auction	0.00	11606.24	8000.00	3606.24
6) Student / Enrichment Programs	225.00	27022.42	18040.00	8982.42
7) Misc Income/Expenses	95.19	4581.66	3900.00	681.66
8) Admin	0.00	119.00	0.00	119.00
9) Committees	1530.00	1530.00	1400.00	130.00
10) Curriculum Support	286.50	291.50	0.00	291.50
11) Special Events	0.00	430.00	0.00	430.00
12) Special Expenses	0.00	0.00	360.00	-360.00
TOTAL INCOME	**2,136.69**	**85,779.71**	**62,600.00**	**23,179.71**

EXPENSES				
1) Membership Dues	0.00	1373.00	1000.00	373.00
4) Fundraising Projects:	0.00	0.00	300.00	-300.00
Ribbet Run	30.00	4065.08	3200.00	865.08
5) Family Events:				
Fall Dance	0.00	2305.18	2100.00	205.18
MITI Fair	0.00	1469.62	1000.00	469.62
Valentine B'fast	0.00	569.55	900.00	-330.45
Bingo Night	0.00	1070.37	700.00	370.37
Spring Carnival	651.49	2691.99	2500.00	191.99
Silent Auction	0.00	2249.44	1000.00	1249.44
6) Student / Enrichment Programs	319.96	37286.42	28840.00	8446.42
7) Misc Income/Expenses	43.74	115.82	150.00	-34.18
8) Admin	652.71	4090.61	2935.00	1155.61
9) Committees	873.03	873.03	2875.00	-2001.97
10) Curriculum Support	5956.94	19465.43	12300.00	7165.43
11) Special Events	300.00	1965.74	1400.00	565.74
12) Special Expenses	12747.98	13401.57	1850.00	11551.57
TOTAL EXPENSES	**21,575.85**	**92,992.85**	**63,050.00**	**29,942.85**
GRAND TOTAL INCOME vs EXPENSES:	**-19,439.16**	**-7,213.14**	**-450.00**	**-6,763.14**

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No 1545-0047

2009

Open To Public Inspection

Name of the organization
H.D. THOREAU ELEMENTARY PTA

Employer identification number
91 : 1093152

Part I **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.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- **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

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

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.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		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.

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 Silent Auction (event type)	(b) Event #2 N/A (event type)	(c) Other events 6 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	11861		10283	22144
	2 Less: Charitable contributions	0		0	0
	3 Gross income (line 1 minus line 2)	11861		10283	22144
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	0	0	0	0
	6 Rent/facility costs	0	0	0	0
	7 Food and beverages	0	0	0	0
	8 Entertainment	0	0	0	0
	9 Other direct expenses	2240	0	10972	13212
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				(13212)
	11 Net income summary. Combine line 3, column (d), and line 10 ▶				8932

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				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d) ▶				( )
	8 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:			
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			

			Yes	No
13 Indicate the percentage of gaming activity operated in:				
a The organization's facility	**13a**	1 %		
b An outside facility	**13b**	0 %		
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:				
Name ▶				
Address ▶				
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	**15a**			✓
b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____ .				
c If "Yes," enter name and address of the third party:				
Name ▶				
Address ▶				
16 Gaming manager information:				
Name ▶ **Jodi Pound & Shannon Camilleri**				
Gaming manager compensation ▶ $ **0**				
Description of services provided ▶ **N/A**				
☑ Director/officer ☐ Employee ☐ Independent contractor				
17 Mandatory distributions:				
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	**17a**			✓
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 ▶ $				

SCHEDULE G				
Fundraising Events	**Revenue**	**Expenses**	**Net**	
Part II - Lines 1-9				
Silent Auction	11861	2240	9621	
TOTAL LINE 1a & 9b	**11861**	**2240**	9621	
Fall Dance	51	2305	-2254	
MITI Holiday Fair	1121	1470	-349	
Valentine B'fast	1153	570	583	
Bingo Night	1494	1070	424	
Spring Carnival	3482	2692	790	
Spirit Wear	2982	2865	117	
TOTAL LINE 6a & 6b	**10283**	**10972**	-689	
GRAND TOTALS:	**22144**	**13212**	**8932**	

Item Number	Retail	Bid	Over/Under	Notes	%bid
B 10	119	80	-39		67%
B11	25	15	-10		60%
B12	50	40	-10		80%
B13	32	25	-7		78%
B14	145	35	-110		24%
B15	56	65	9		116%
B16	208	80	-128		38%
B17	50	60	10		120%
B18	108	100	-8		93%
B19	200	0	-200	missing/?stolen?	0%
B20	50	40	-10		80%
B21	25	20	-5		80%
B22	100	90	-10		90%
B23	50	45	-5		90%
B24	56	50	-6		89%
B25	70	50	-20		71%
B26	200	20	-180		10%
B27	100	0	-100	?missing	0%
B28	50	40	-10		80%
B29	150	105	-45		70%
B30	30	30	0		100%
B31	50	40	-10		80%
B32	325	160	-165		49%
B33	30	35	5		117%
B34	50	15	-35		30%
B35	120	65	-55		54%
B36	55	20	-35		36%
B37	52	30	-22		58%
B38	140	80	-60		57%
B39	45	15	-30		33%
B40	30	15	-15		50%
B41	50	35	-15		70%
B42	60	35	-25		58%
B43	195	60	-135		31%
B44	60	25	-35		42%
B45	130	90	-40		69%
B46	50	15	-35		30%
B47	25	20	-5		80%
B48	50	45	-5		90%
S 10	72	60	-12		83%
S11	79	20	-59		25%
S12	150	65	-85		43%
S13	68	80	12		118%
S14	68	35	-33		51%
S15	150	65	-85		43%
S16	75	70	-5		93%
S17	250	35	-215		14%
S18	100	50	-50		50%
S19	745	380	-365		51%

S20	60	65	5		108%
S21	215	145	-70		67%
S22	60	50	-10		83%
S23	69	30	-39		43%
S24	105	115	10		110%
S25	50	20	-30		40%
S26	172	50	-122		29%
S27	130	80	-50		62%
S28	60	20	-40		33%
S29	155	65	-90		42%
S30	80	80	0		100%
S31	30	30	0		100%
S32	225	80	-145		36%
S33	78	30	-48		38%
S34	105	50	-55		48%
S35	994	120	-874		12%
S36	30	35	5		117%
S37	80	10	-70		13%
S38	200	80	-120		40%
S39	150	105	-45		70%
S40	10	10	0		100%
S41	72	40	-32		56%
S42	100	90	-10		90%
S43	106	80	-26		75%
S44	32	20	-12		63%
S45	50	20	-30		40%
S46	30	20	-10		67%
S47	25	5	-20		20%
S48	50	15	-35		30%
S49	118	125	7		106%
S50	150	60	-90		40%
S51	102	40	-62		39%
S52	30	20	-10		67%
S53	90	80	-10		89%
P 10	50	40	-10		80%
P11	90	40	-50		44%
P12	200	80	-120		40%
P13	150	15	-135		10%
P14	89	30	-59		34%
P15	388	200	-188		52%
P16	75	50	-25		67%
P17	150	150	0		100%
P18	50	30	-20		60%
P19	300	120	-180		40%
P20	190	65	-125		34%
P21	327	50	-277		15%
P22	48	30	-18		63%
P23	72	60	-12		83%
P24	108	20	-88		19%
P25	50	25	-25		50%

P26	165	130	-35		79%
P27	30	70	40		233%
P28	299	65	-234		22%
P29	60	55	-5		92%
P30	50	40	-10		80%
P31	417	40	-377		10%
P32	100	60	-40		60%
P33	450	320	-130		71%
P34	100	100	0		100%
P35	75	45	-30		60%
P36	100	20	-80		20%
P37	320	40	-280	dif in price/retail X2	13%
P38	84	80	-4		95%
P39	89	30	-59		34%
P40	300	80	-220		27%
P41	44	30	-14		68%
P42	40	20	-20		50%
P43	70	55	-15		79%
P44	238	105	-133		44%
P45	130	150	20		115%
P46	500	40	-460		8%
P47	80	50	-30		63%
P48	60	10	-50		17%
P49	30	25	-5		83%
P50	120	40	-80		33%
P51	200	130	-70		65%
G 10	475	120	-355		25%
G11	58	30	-28		52%
G12	100	30	-70		30%
G13	225	80	-145		36%
G14	120	50	-70		42%
G15	166	105	-61		63%
G16	100	50	-50		50%
G17	195	80	-115		41%
G18	48	30	-18		63%
G19	30	30	0		100%
G20	499	200	-299		40%
G21	40	40	0		100%
G22	100	60	-40		60%
G23	200	105	-95		53%
G24	96	70	-26		73%
G25	100	80	-20		80%
G26	50	25	-25		50%
G27	350	100	-250		29%
G28	80	60	-20		75%
G29	55	35	-20		64%
G30	44	44	0		100%
G31	100	80	-20		80%
G32	180	100	-80		56%
G33	135	95	-40		70%

G34	800	0	-800	no bids	0%
G35	70	60	-10		86%
G36	88	60	-28		68%
G37	50	20	-30		40%
G38	148	80	-68		54%
G39	40	30	-10		75%
G40	70	60	-10		86%
G41	82	30	-52		37%
G42	150	105	-45		70%
G43	76	20	-56		26%
G44	78	20	-58		26%
G45	535	340	-195		64%
G46	50	40	-10		80%
G47	50	15	-35		30%
G48	150	80	-70		53%
G49	115	40	-75		35%
G50	100	10	-90		10%
G51	65	30	-35		46%
G52	150	65	-85		43%
Total	22062	10174	-11888		46%